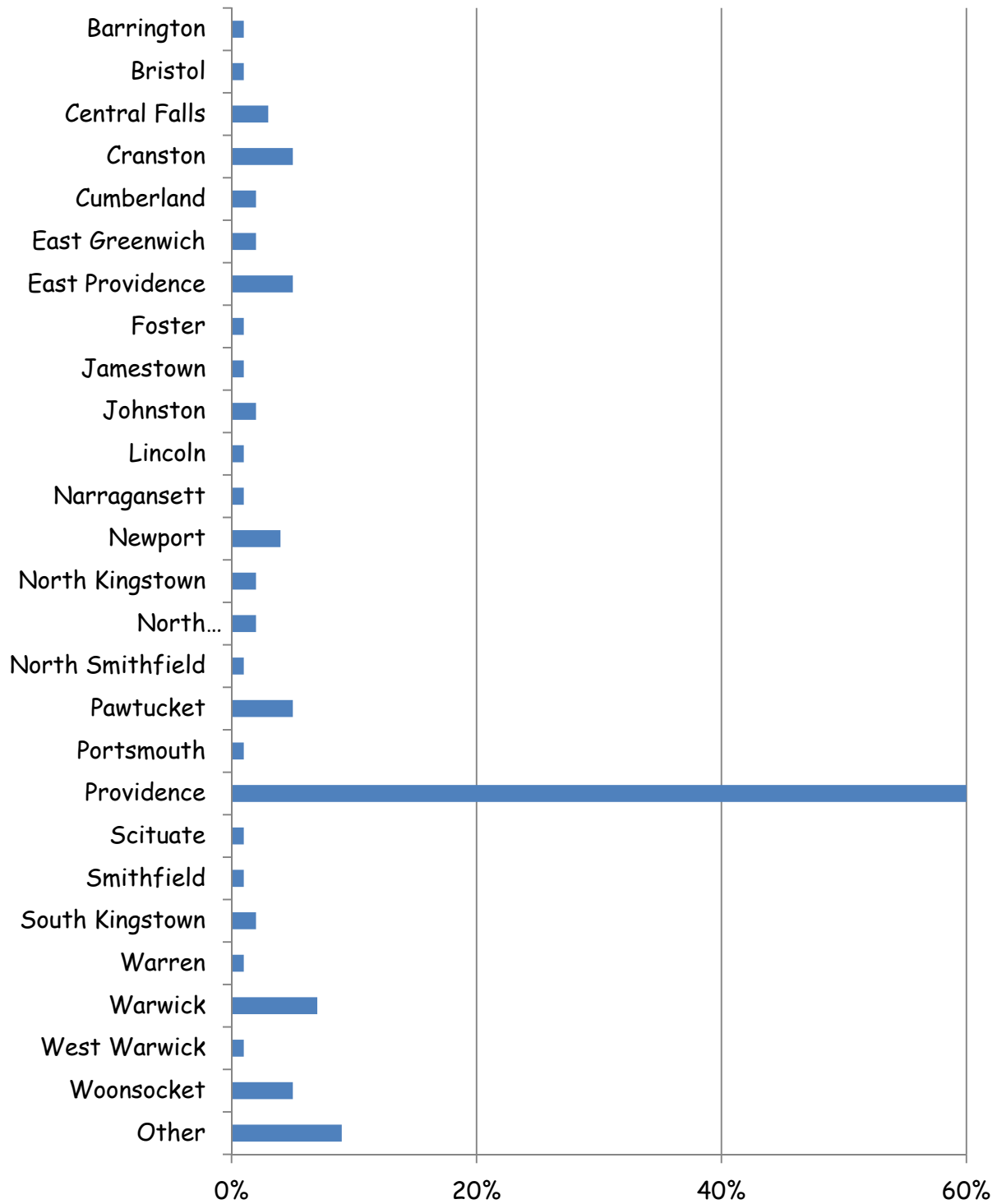
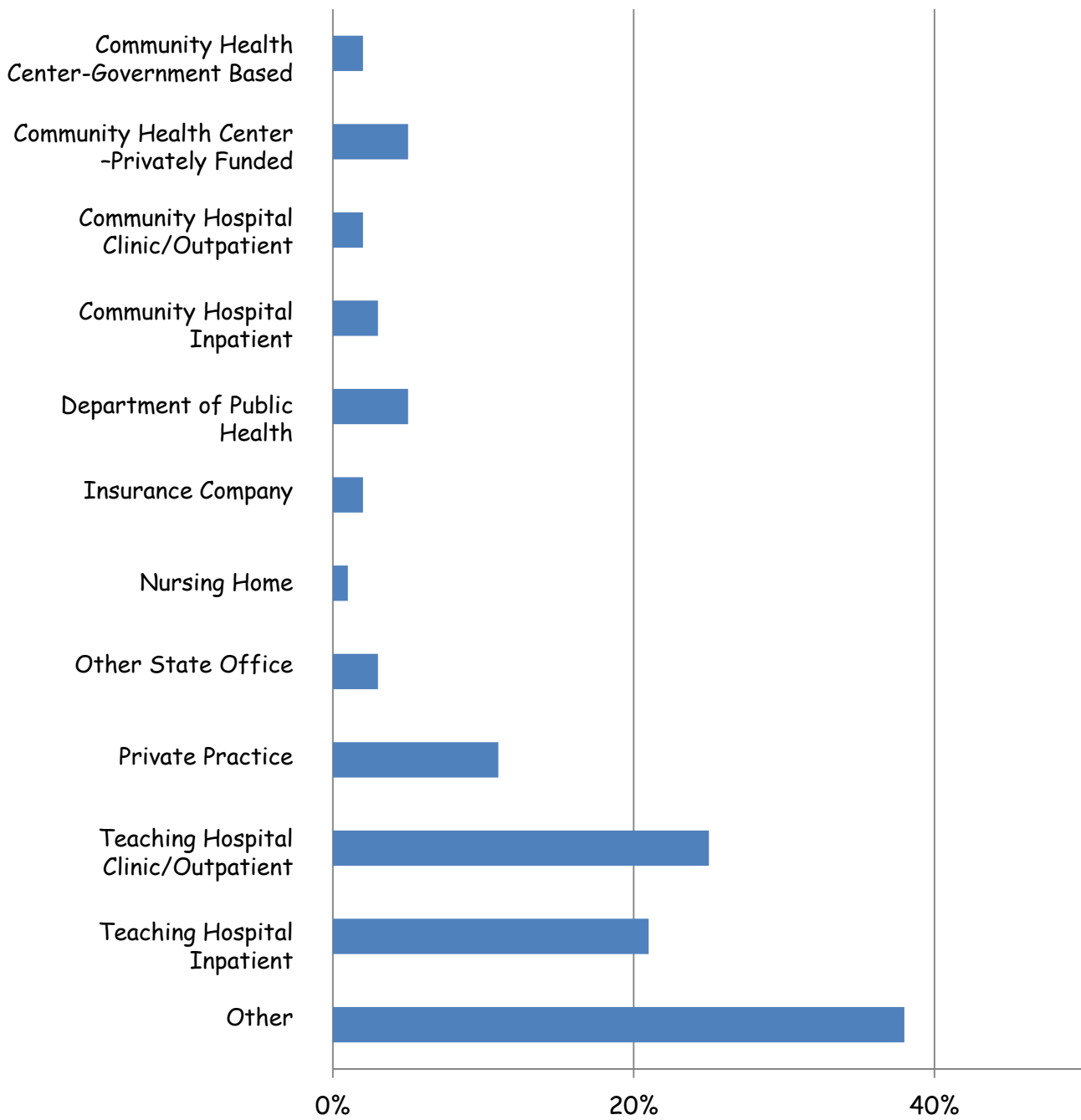


## City/Town Location(s) Where you Work



Notes: 1 didn't respond, respondents gave multiple responses

# Type of Practice/Employer



Notes: 1 didn't respond, respondents gave multiple responses