



EXEMPTION ORDER

APPLICANT / ARTIST _____ MAILO REF. _____ APPLICATION DATE ____ / ____ / ____
DAY MONTH YEAR

ADDRESS _____

ZIP or POSTCODE _____ COUNTRY _____ EMAIL _____

PROPOSITION The Applicant named above herein seeks voluntary discharge and licence to be excused from Mail Art activities, to be absolved of Networking contrition and free of all obligation pertaining to cultural exchange.

REASON FOR EXEMPTION _____

SPECIFIC AREAS **NOT** COVERED BY THIS EXEMPTION ORDER _____

PROPOSED COMMENCEMENT OF EXEMPTION ____ / ____ / ____
DAY MONTH YEAR

TREATMENT ENTITLEMENT:

- | | | |
|--|---|---|
| Perforation Therapy <input type="checkbox"/> | Art Withdrawal Counselling <input type="checkbox"/> | Envelope Adhesive Misuse <input type="checkbox"/> |
| Tourist Quarantine <input type="checkbox"/> | Paper Dependency Clinic <input type="checkbox"/> | Archive Management <input type="checkbox"/> |

VALIDATION To validate the Exemption Order, the Applicant must sign the form below in the presence of the Endorsing Officer.

NAME OF EXEMPTEE _____ SIGNATURE OF EXEMPTEE _____

ENDORISING OFFICER _____ DATE OF EXEMPTION ____ / ____ / ____
DAY MONTH YEAR

CAUTION This order may be invalidated by Act of Dada or significant Fluxual intervention by the exemptee. The Licensing Office is not liable for any nullification or countermand resulting from the actions of the exemptee.

Form MAEO-47b

FOR OFFICE USE ONLY

I attest that the exemptee named below has been granted unlimited dispensation from Mail Art and Networking exchanges from the date specified until such time as the exemptee initiates authorized reversal proceedings, engages in significant Fluxual intervention, is subject to an Act of Dada, or is deemed by the Licensing Office to have breached the terms of the Exemption Order.

NAME OF EXEMPTEE _____ APPROVAL CODE

ENDORISING OFFICER _____ DATE OF EXEMPTION ____ / ____ / ____
DAY MONTH YEAR

ART DETOX

ENDORSEMENT

Form MAEO-47b