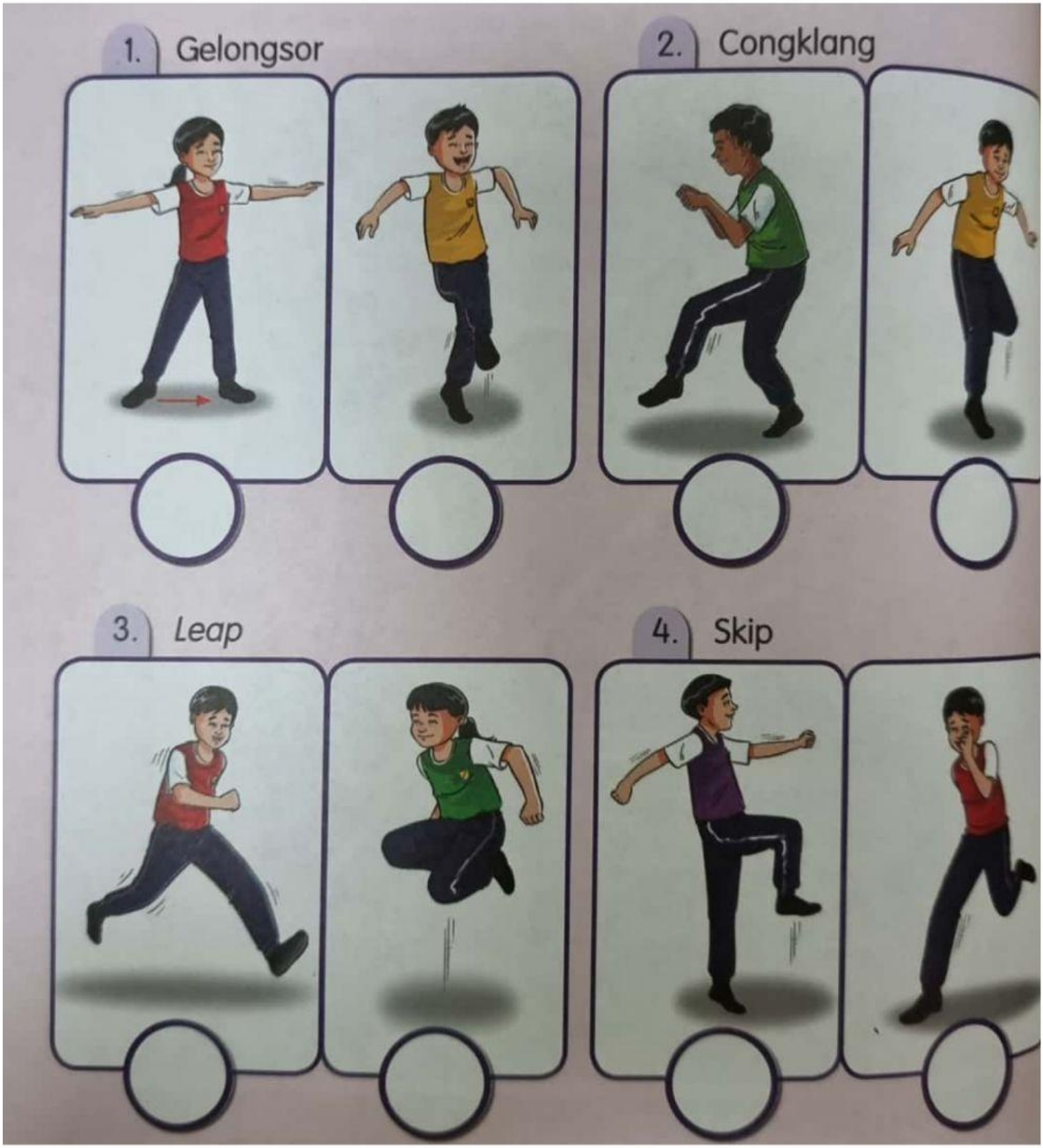
Hari :

Tarikh :

Tulis YA pada jawapan yang betul.



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