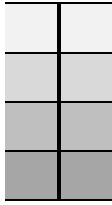
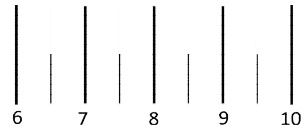


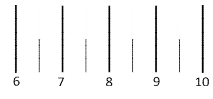





Name _____
 Date _____

Judge's Name _____

Roast Level 	Fragrance/ Aroma ÷2  <i>Notes</i>	Flavour ÷2  Aftertaste □ 	Acidity x2  Intensity _____ High _____ _____ _____ Low	Body x2  Level _____ Heavy _____ _____ _____ Thin	Sweetness x2  Development _____ Chocolate _____ _____ Candy _____ _____ Sweet Grains	Overall □  Uniformity <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="padding: 5px;">Total Score</td> <td style="padding: 5px; width: 50px; text-align: center;">/90</td> </tr> </table>						Total Score	/90
Total Score	/90						
<i>Notes</i>							

6 = good 7 = very good 8 = excellent 9 = outstanding