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First Name: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/2007

Location: \_\_\_\_\_

Session #: \_\_\_\_\_

## Handout 2

Take a look at your stacked cards. Each card has a letter in the lower right-hand corner. Please write the letter of each statement in the blanks below in the order in which you sorted the cards.

Most convincing

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Least convincing

\_\_\_\_\_