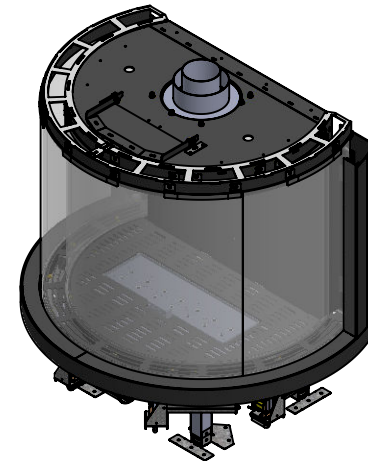
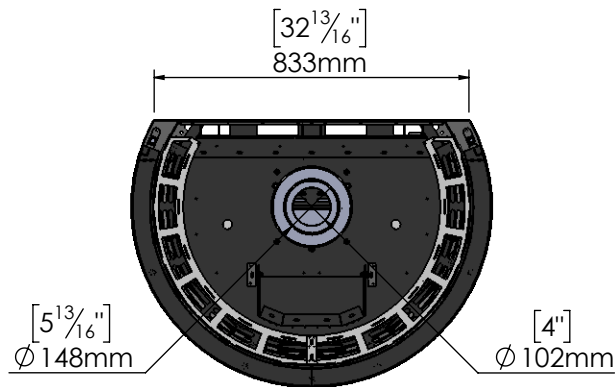
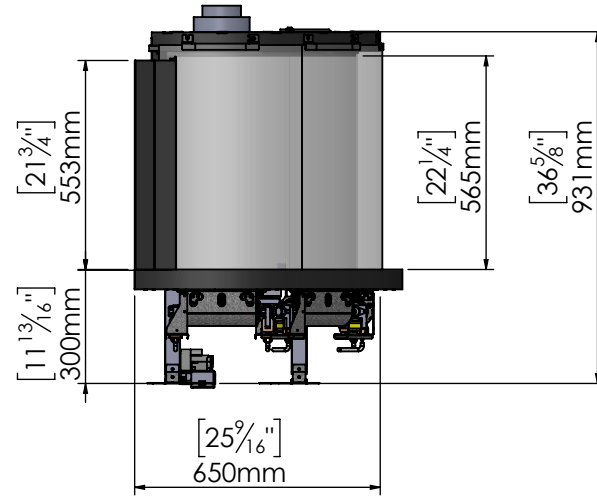
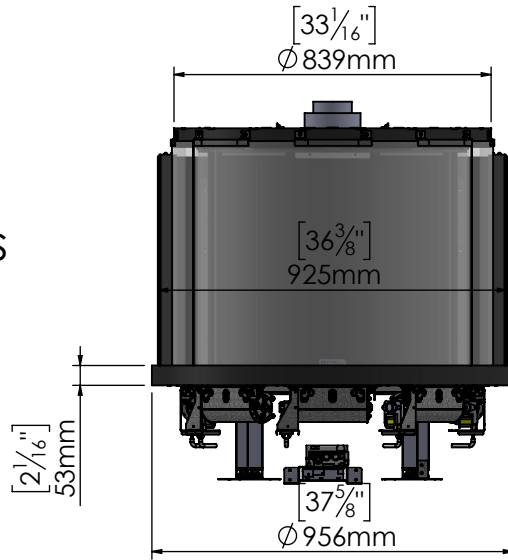


## Circle 70

270

Double Glass



**Please Note:**

Order No.(fill in by Ortal): \_\_\_\_\_

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Marketing Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_