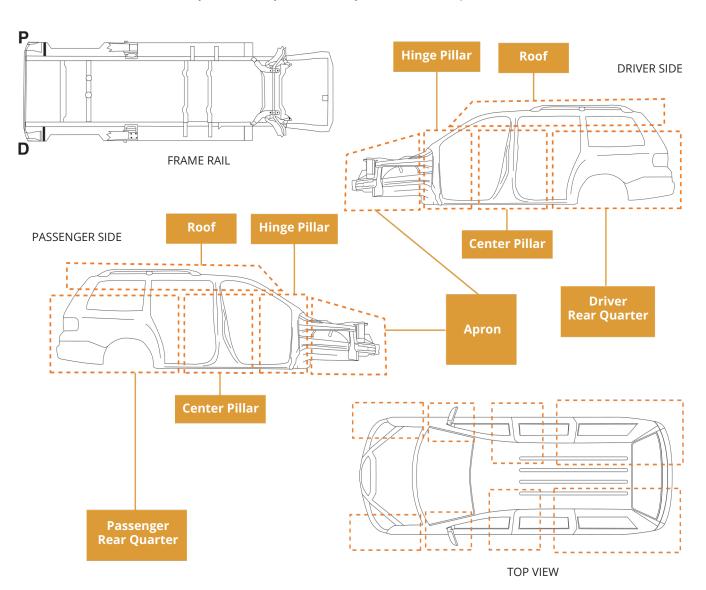


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Date:	P.O. #:		MINI VAN CUT SHEET		
To:			From:		
Phone #:	Fax #:		Phone #:	Fax #:	
E-mail:			E-mail:		
Please Note: All	cuts are final and returns	s are not accepted. Sign he	ere to acknowledge thi	s:	
		Vehicle Spec	S		
Year:	Make:	Model:	VIN #:		

Please mark your cuts clearly and include any measurements or specific instructions:



Please describe your cut and instructions in as much detail as possible: