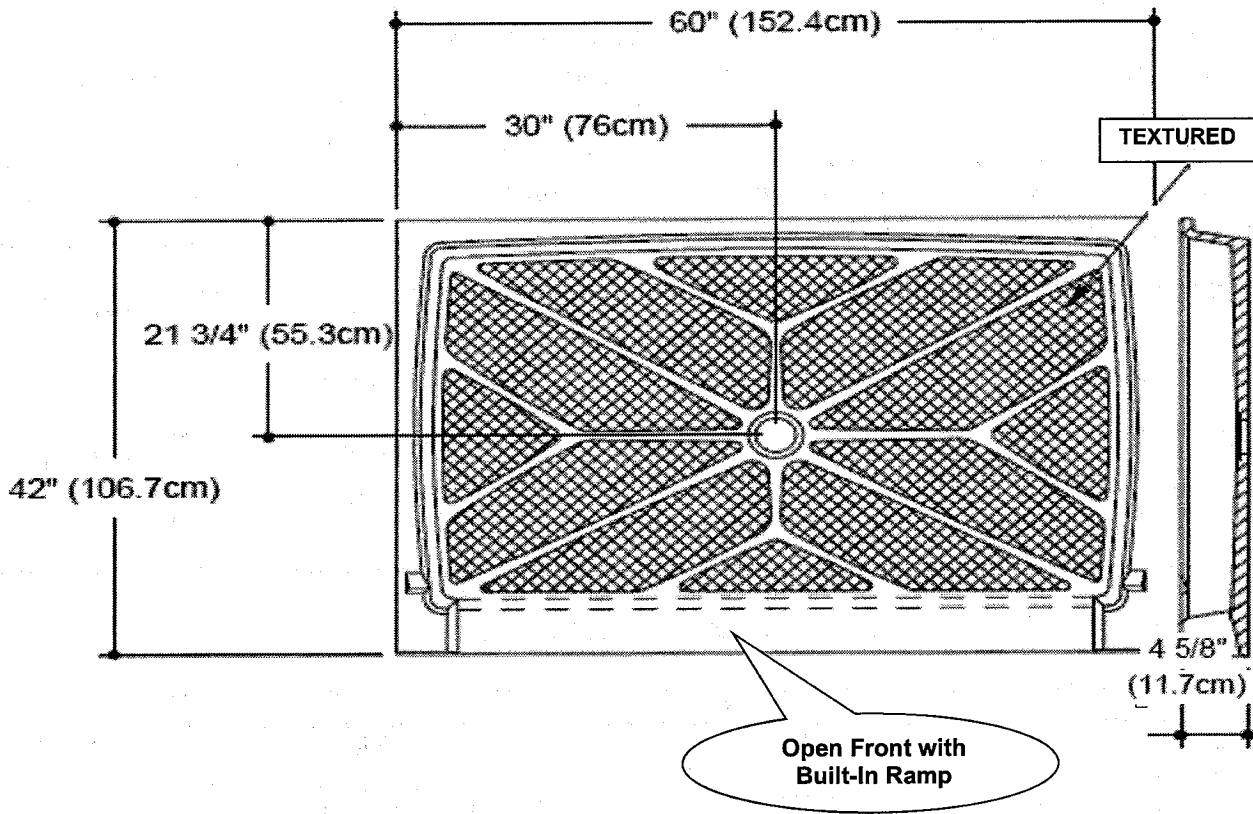


DATE:	Contact:	Mr MARBLE™ ORDER DESK FAX:905-760-2395
STORE:	TEL:	
LOCATION:	FAX:	Pick Up <input type="checkbox"/>
PO#:	TAG Name:	FOB Ship Pt. <input type="checkbox"/>
		FOB Dest. <input type="checkbox"/>

ADA DESIGN 

SPECIAL NEED BARRIER FREE SHOWER BASE



* Drain Fixture is NOT Included

SPECIAL NOTES & INSTRUCTIONS	COLOR/FINISH:	PACKAGING	CardBoard	Yes	<input type="checkbox"/> No	<input type="checkbox"/>
	Signature/PRICE:	CRATING*	Yes	<input type="checkbox"/> No	<input type="checkbox"/>	

*EXTRA charges apply.