MINIVAN FORM

INICORPORATED
WEBSTER - ONTARIO - WILLIAMSON

			WEBSTER - ONTARIO - WILLIAMSON
Date:	Salespers	on:	Phone:
Location:			Return Fax #
Customer:		Contact:	Phone:
Year:	Make:	Model:	PO #:
Directions: Ple	ase make clearly visible lines	to ensure proper cut is mad	e. This is a special order item that is subject to a \$125
-		-	te to contact your Salesperson.
Signature:		L	Date:
	PASSENGER SIDE		
	a	Plea	ase use the area below for a detail of cut instructions:
	TOP VIEW		
		Not	es:
	DRIVER SIDE		
P D	UNDERBODY VIEV		
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