



NAME: \_\_\_\_\_  
 COMPANY: \_\_\_\_\_  
 PROJECT NAME/PO: \_\_\_\_\_  
 REQUESTED COMPLETION: \_\_\_\_\_

PAGE \_\_\_\_ OF \_\_\_\_ APPROVED: \_\_\_\_\_ DATE: \_\_\_\_\_

PART NAME: _____ PART QNTY: _____ PART LENGTH: _____ PART COLOR: _____ PART GAUGE: _____ PLEASE INCLUDE: <input type="checkbox"/> ANGLES <input type="checkbox"/> DIMENSIONS <input type="checkbox"/> HEM TYPE (CH=CLOSED OH=OPEN) <input type="checkbox"/> INDICATE FINISH SIDE SPECIAL NOTES: _____ _____ _____	
OFFICE USE: S/O: _____ FCN: _____ PARTS/SHT: _____ SHT REQ'D: _____	FAB SHOP USE:
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