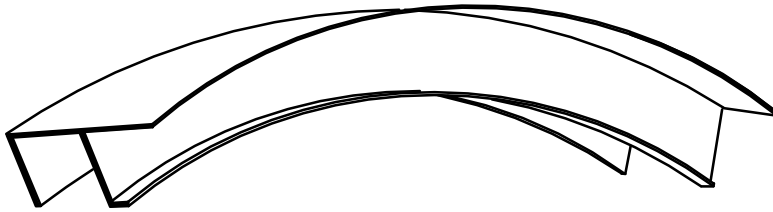


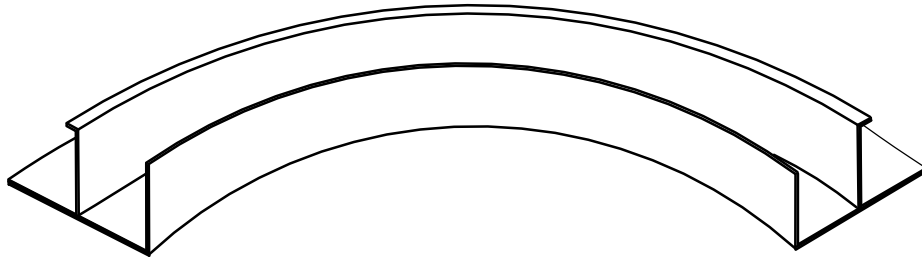
TYPE 1



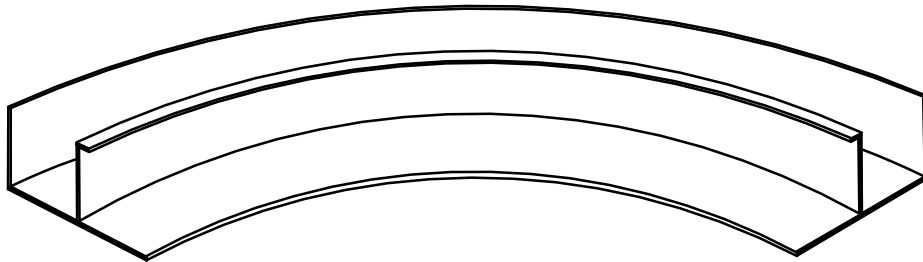
TYPE 2



TYPE 3



TYPE 4



PLEASE CIRCLE DIRECTION OF RADIUS. R = _____



CUSTOMER: _____

JOB NAME: _____

DESCRIPTION: **F Mold Radius** _____

DATE: _____

1641 SO. SINCLAIR ST., ANAHEIM, CA 92806
PH: (714) 978-3600 FAX: (714) 978-3601