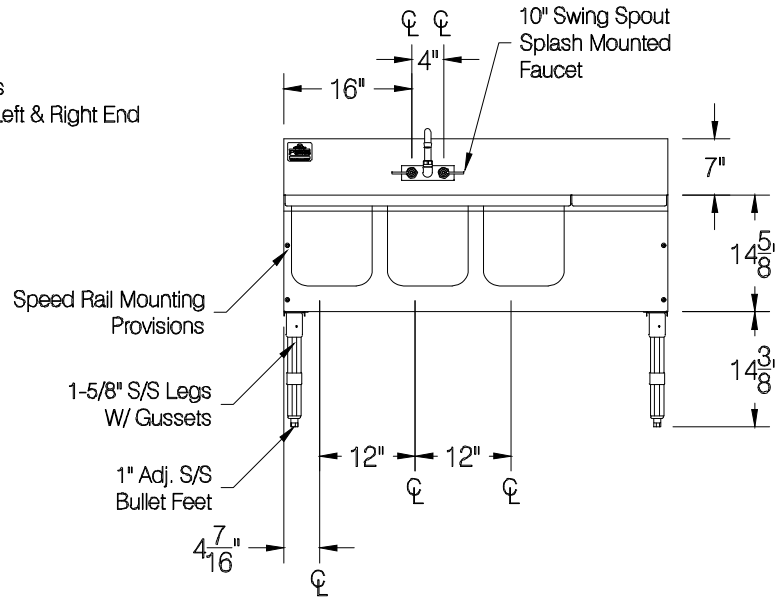
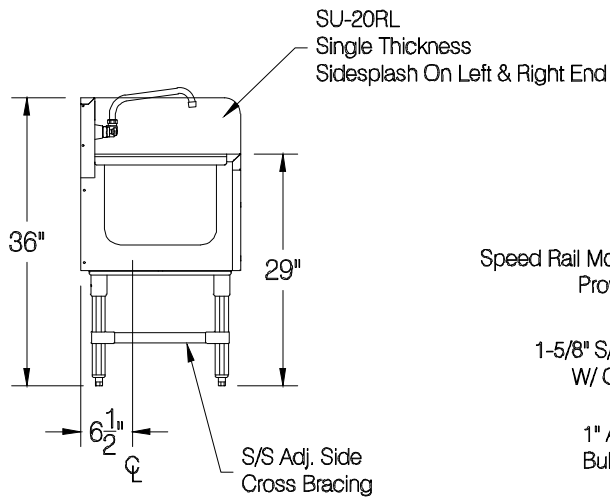
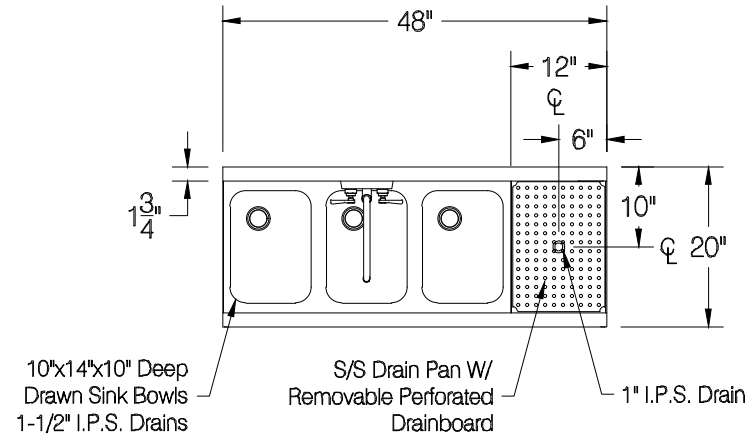


Quantity: _____



Customer:	Order / Quote #	Sheet #	Original Drawing Date:	NO.	Revision Date:	By:	Print Approval:	
	4148		9/12/2023	1				
Job Name:	Model #	Item #	Material:	2			Accessory Locations MUST Be Verified Prior To Unit Being Fabricated	
	PRB-19-43L		20 GA. 300 S/S	3				
Purchase Order # :	Drawn By:	Scale:	Tolerance:	4				Approved By _____ Date _____
	E.Mencarelli	1/2" = 12"	+ .500 - .500	5				
FACTORY USE ONLY:	WELDING:		Final Inspection:					Approved By _____ Date _____
	1) Date: _____ Inspected By: _____ 2) Date: _____ Inspected By: _____		1) Date: _____ Inspected By: _____ 2) Date: _____ Inspected By: _____					

