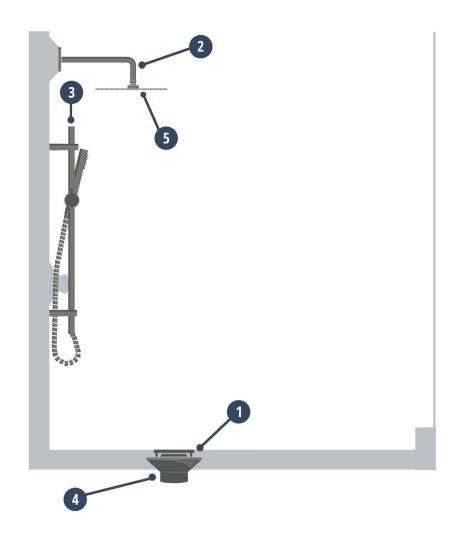
Shower



Project Location:
Date:
Customer Name:
Sales Order Number:

- 1. Drain Grid*_____
- 2. Shower Arm
- 3. Shower Rail & Handshower
- 4. Drain Body*_____
- 5. Shower Head _____



Mandatory Not Mandatory *Available as a Complete Kit