

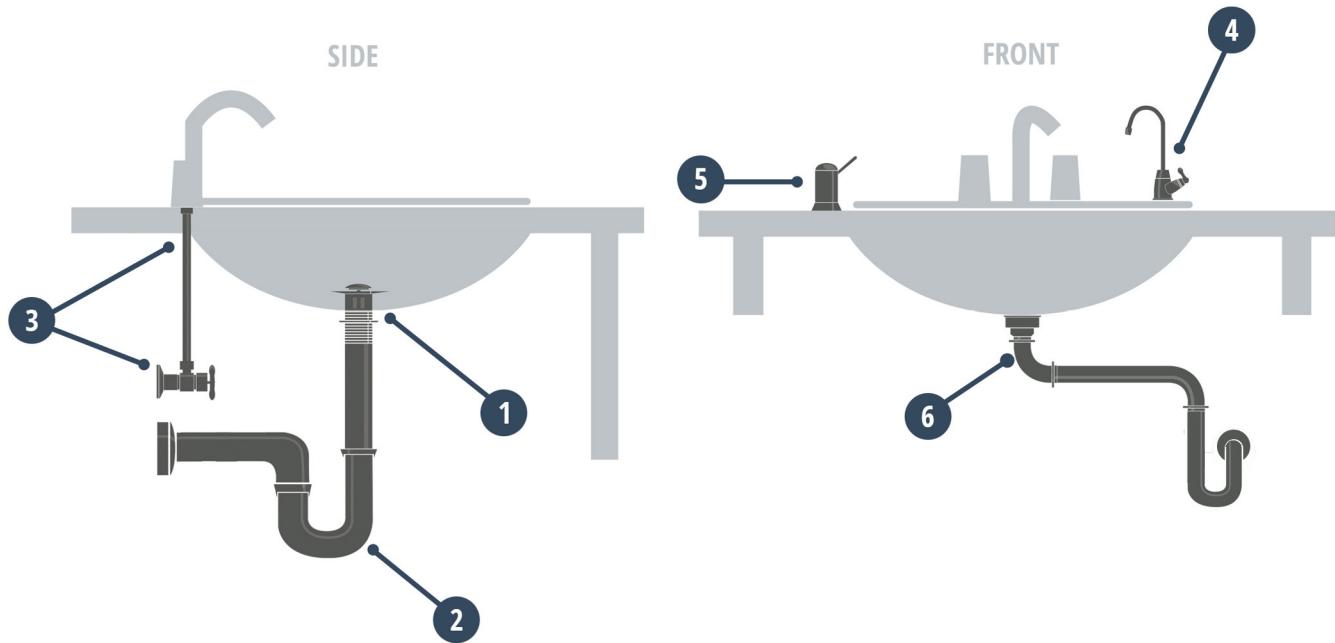
Project Location: _____

Date: _____

Customer Name: _____

Sales Order Number: _____

- 1. Lavatory Drain (with or without Overflow)*** _____
- 2. Lavatory Trap*** _____
- 3. Lavatory Supply Kit*** _____
- 4. Point-of-Use Faucet** _____
- 5. Soap/Lotion Dispenser** _____
- 6. Lavatory Space Saving Trap** _____



■ Mandatory

■ Not Mandatory

*Available as a Complete Kit