

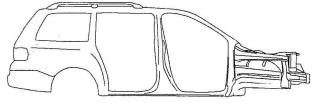
Phone #: _____

Model: _____

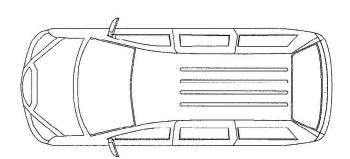
PO #: ___

MINIVAN FORM

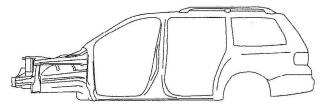
Date: _____ From: _____ Contact Person: _____ Fax #: _____ Make: _____ VIN: Build Date: _____



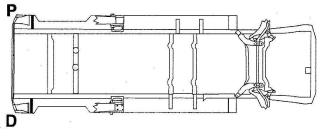
PASSENGER SIDE



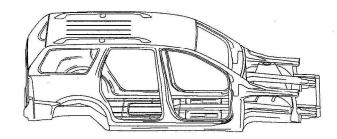
TOP VIEW



DRIVER SIDE



TOP VIEW



Notes: