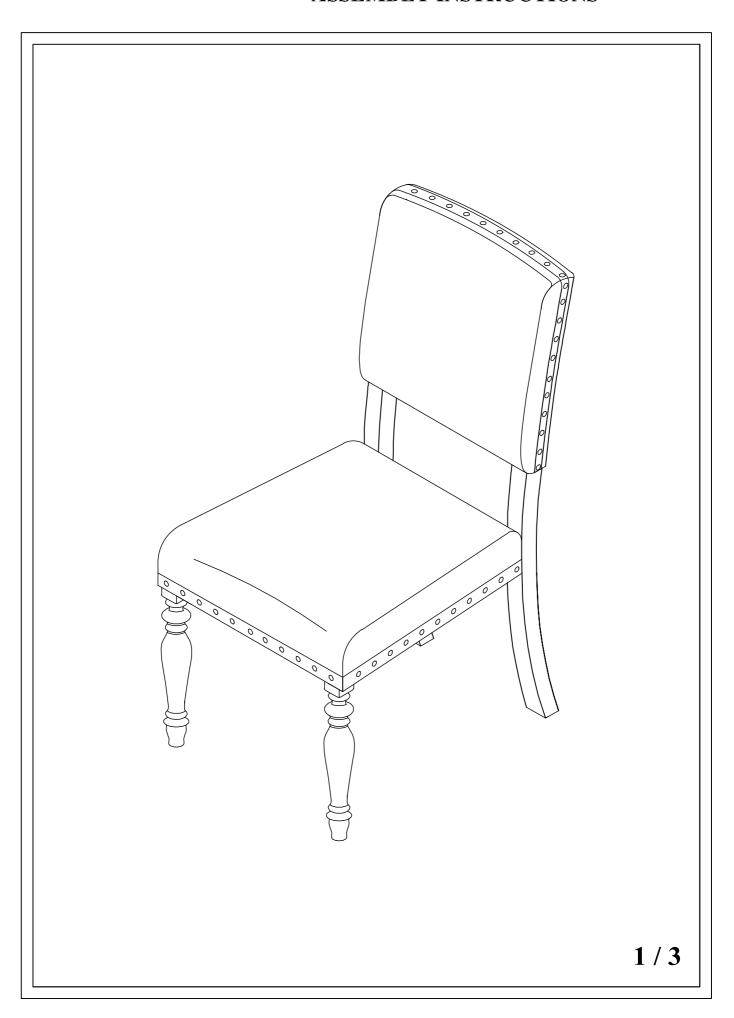
Parts and Damage Replacement Procedure

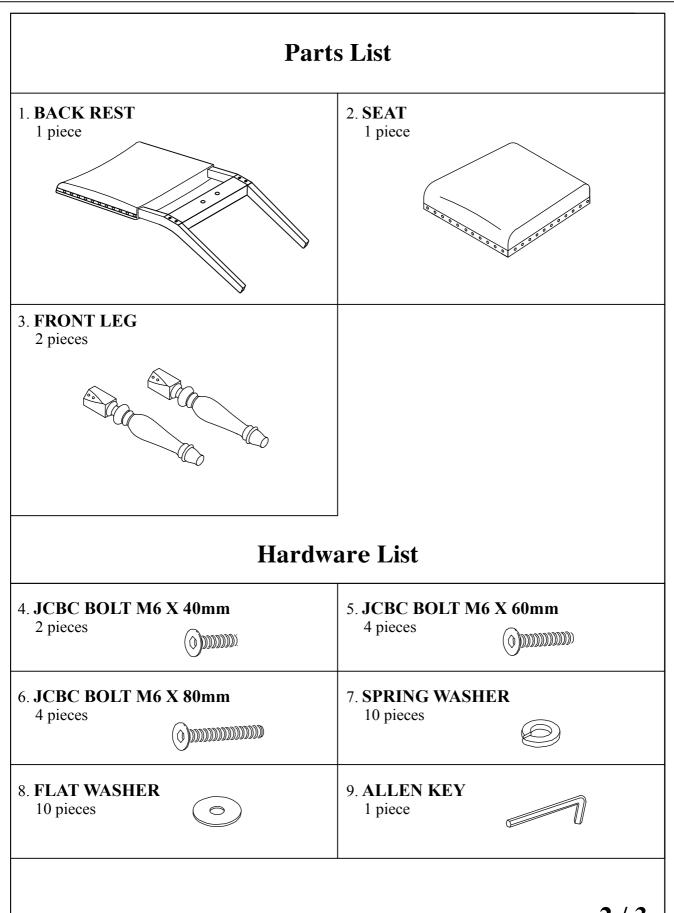
A COPY OF YOUR PURCHASE RECEIPT OR INVOICE MUST BE ATTACHED TO THIS ORDER FORM. NO ORDERS WILL BE PROCESSED WITHOUT PROOF OF PURCHASE.

	NAME:			
	ADDRESS:			
	CITY:	STATE:	ZIP:	
	PHONE:		FAX:	
	EMAIL:			
	REASON FOR REPLACEMENT/PLEASE CHECK APPROPRIATE BOX.			
 () Damaged /scratched, cracked, broken, crushed, etc. () Mechanical malfunction/ drawer glides, swivel mechanisms, lid stays, etc. () Missing pieces () Unfinished surface () Wrong color () Other IF MORE THAN ONE MODEL NUMBER IS LISTED ABOVE, PLEASE SPECIFY THE EXACT MODEL NUMBER				
IIEM IN	N THE SPACE PROVIDE	ED BELOW.	Part Letter Code	Quantity

ASSEMBLY INSTRUCTIONS



ASSEMBLY INSTRUCTIONS



ASSEMBLY INSTRUCTIONS

