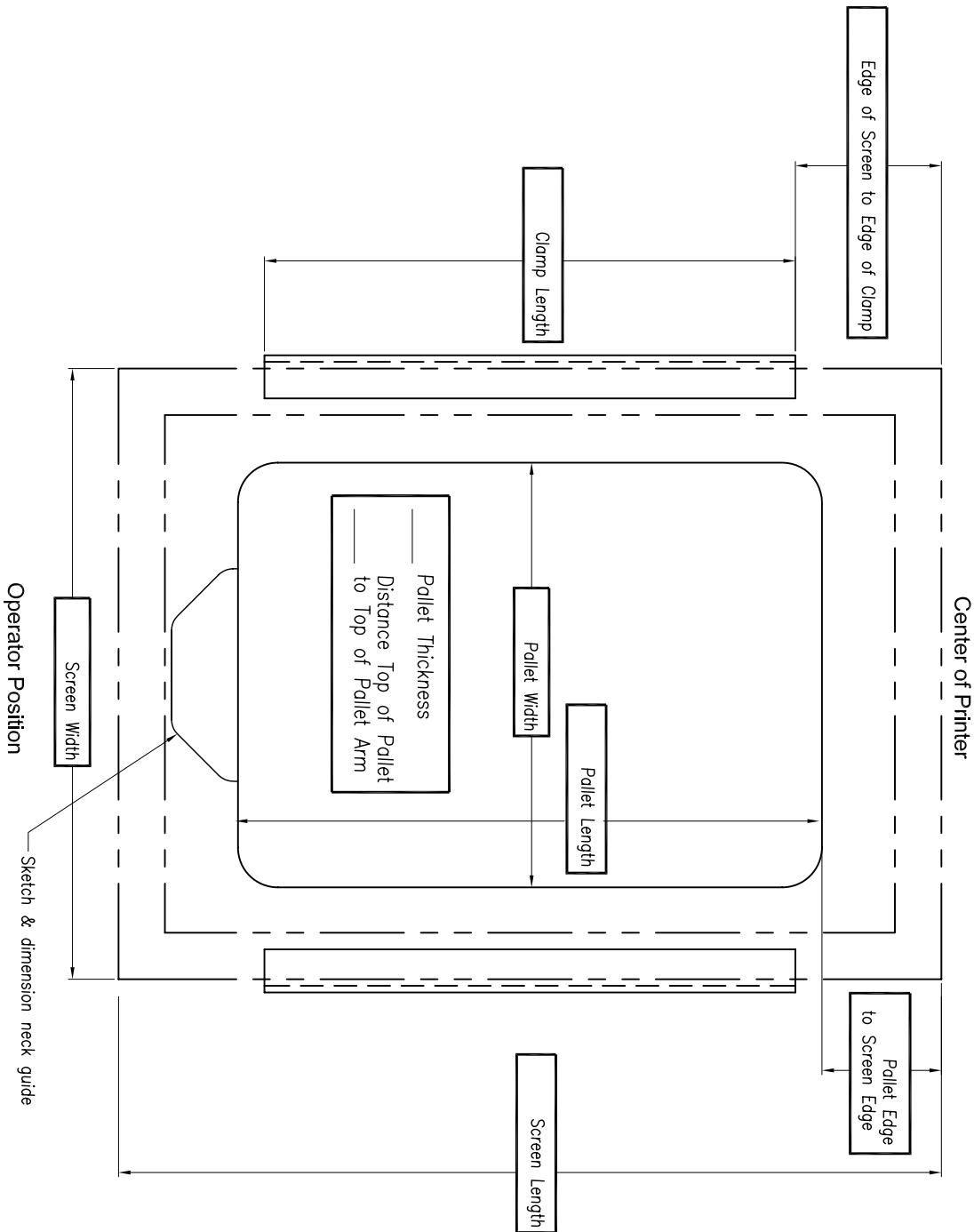


REVISIONS			
REV	DESCRIPTION	DATE	BY APP'D



Please fill in the following information:

- 1) Enter dimensions in bold boxes.
 - 2) Customer name _____
 - 3) Customer Ph. # _____
 - 4) Contact person _____
 - 5) Printer Mfg./Model _____
 - 6) Screen type _____
 - 7) Indicate shape & size of neck guide.
- E-Mail or Fax back completed form:
 Vastex International Inc.
 E-Mail sales@vastex.com
 Fax # 1.610.434.6607 Attn. Eng. Dept.
 Questions call 1.610.434.6004 Attn. Eng. Dept.

SCREEN PRINTING		TOLERANCES UNLESS OTHERWISE SPECIFIED		VASTEX INTERNATIONAL	
SPACE 7500				TITLE: PALLET JIG SPECS	
VASTEX.COM				AUTOMATICS W/SIDE CLAMPS	
BY	DATE	DECIMAL	.XXX	XX	X
CD	09/15/06	FRACTION	±.010	±.015	±.032
CHECKED		ANGLE	±1"		
APPROVED		SCALE	125	NONE	
		SIZE	C	DRAWING NO.	VRS-PLJA-SPECS-2
		REV#			-
				SHEET 1	OF 1