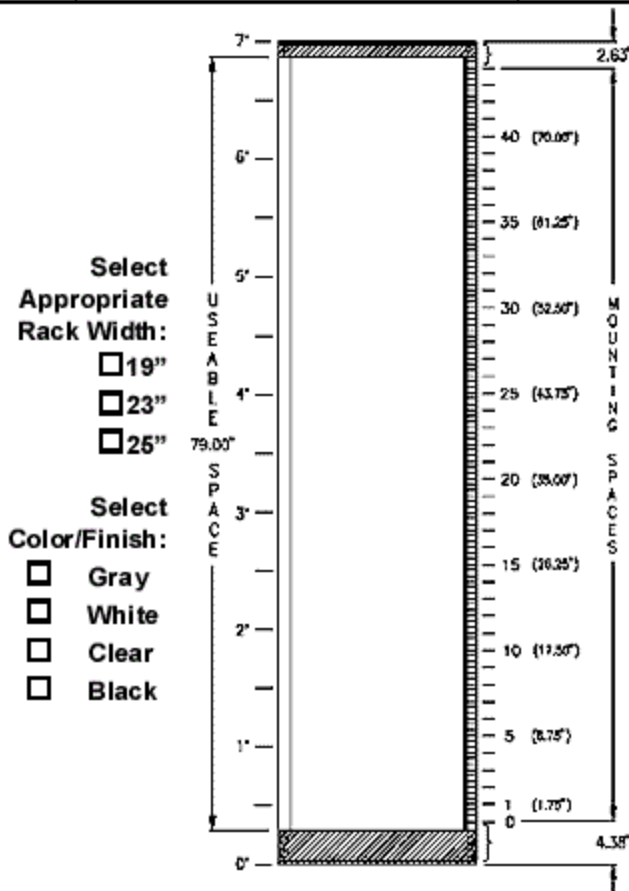


DISTRIBUTOR/VAR _____
 CONTACT _____
 PHONE _____ FAX _____
 CUSTOMER _____
 CONTACT _____
 PHONE _____ FAX _____

DATE _____
 INDIVIDUAL RACK # _____
 TOTAL RACKS _____

CUSTOMER EQUIPMENT

ITEM	DESCRIPTION	QUANTITY	WIDTH	HEIGHT	DEPTH	WEIGHT	POWER Y OR N
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							



	QTY.	PART NO.	DESCRIPTION
FILE SERVER			
MONITOR SHELF			
SWITCH BOX			
KEYBOARD TRAY			
SHELVES			
POWER STRIP			
RAISED FLOOR SUPPORT			
EARTHQUAKE TIE-DOWN BRACING			
CABLING SEC. ENCLOSURE			
WIRE MGMT.			
OTHER			

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