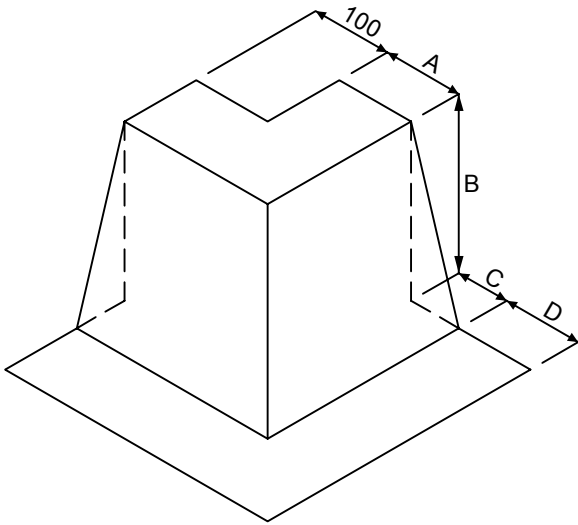
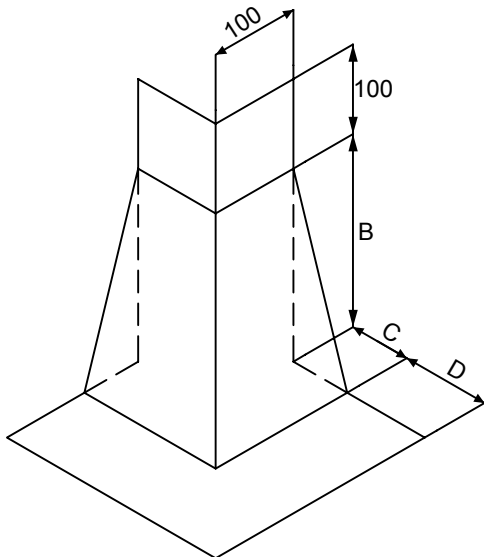


External Corner Cloak



A	
B	
C	
D	
Quantity	

Surface Fix External Corner Cloak



B	
C	
D	
Quantity	

Contact Name
Contact Number

Project Detail