

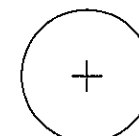
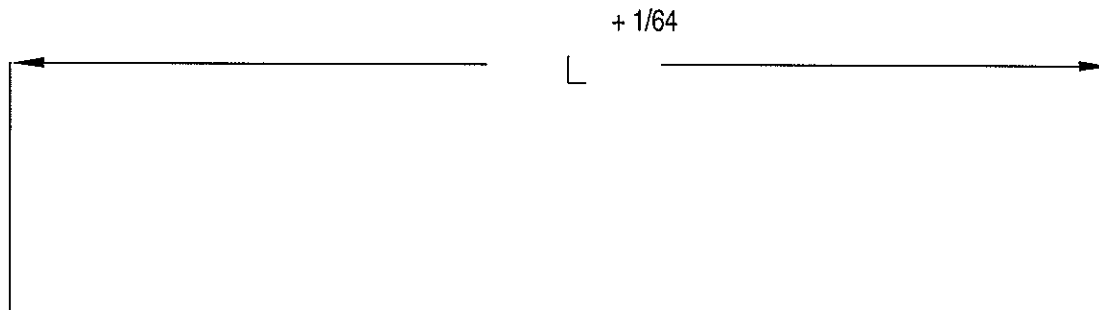
DET# A L
#1

NOTE: DWG MUST BE SIGNED-OFF B/4 AN ORDER WILL BE ACCEPTED!!!

BY: _____

DATE: _____

| REVISIONS | | | | |
|-----------|-----|-------------|------|----------|
| ZONE | REV | DESCRIPTION | DATE | APPROVED |



A -.0005

NAME: _____
 COMPANY: _____
 ADDRESS: _____
 CITY, STATE, ZIP: _____
 FAX# _____
 PH# _____

TOLERANCE UNLESS OTHERWISE SPECIFIED

.X = ±.010
 .XX = ±.005
 .XXX = ±.001
 .XXXX = ±.0005
 FRAC = ±1/64

STYLE I KO PIN

VERMONT PRECISION TOOLS, INC
 10 PRECISION LANE
 SWANTON, VT 05488

MAT: _____ RC

| | | | |
|------|----------|---------|-----|
| SIZE | FSCM NO. | DWG NO. | REV |
|------|----------|---------|-----|

FAX TO VPT @ # 802-868-7180

| | |
|-----------|--------------|
| SCALE N/A | SHEET 1 OF 1 |
|-----------|--------------|