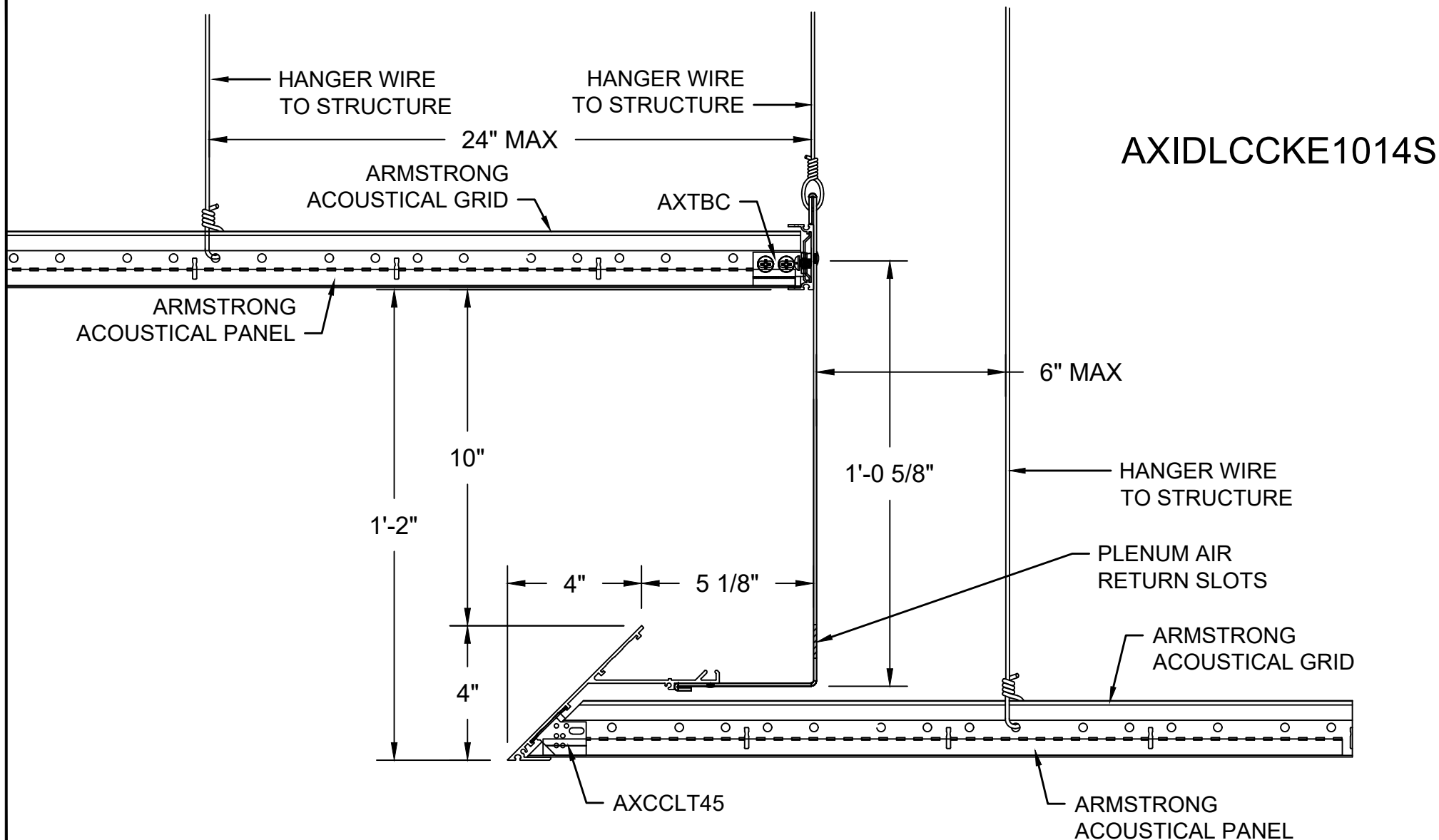


C:\VAULT\PI\DESIGNS\AXIOM\AXIOM INDIRECT LIGHT COVE\CUSTOMER DRAWINGS\AXIDLCCKE1014S.DWG



CUSTOMER APPROVAL

SIGNATURE: _____ DATE: _____



Installer Note: Questions or
problems with the installation.
Call our Hotline: 800 840 8521

CUSTOMER NAME:	Armstrong	DATE:	03/25/21
POC.	xxxxxx	REVISION:	#
PROJECT:	AXIDLCCKE1014S	DRAWN BY:	MIKE
PROJECT #:		SCALE:	NTS
CAD FILE:	Armstrong/Axiom/Indirect Light Coves	SHEET:	1 OF 1