

APPENDIX

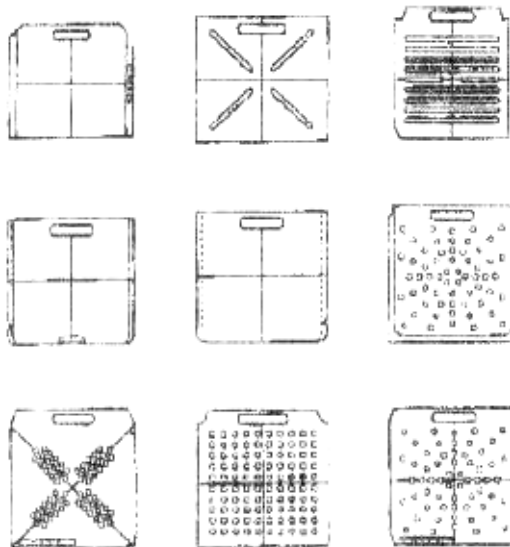
BLOCKING TRAY Specifications Worksheet

Facility _____ City _____ State _____
Contact Person _____ Title _____
Phone _____ E-Mail _____ Teletherapy Unit _____

Tray Material Lexan Acrylic
Tray Dimensions Width _____ Length _____
Tray Thickness 1/4" 3/8" 1/2" 3/4" Other _____

Hole Pattern: Circle one

Cross Hair Yes No
Handle Yes No
Coding Screws Yes No
Locking Device Yes No
Coding Plug Yes No



Quantity of Blocks Needed: _____

Comments:

The price per tray is based on the above specifications and the number of trays ordered. When a blocking tray is to be made for the first time, we request that you send an existing sample tray to JRT Associates with your purchase order. A template will be made of the tray and used for future orders. The sample tray will be returned to you.

Please complete this entire form and fax or mail to:

FAX: 914-592-3167

JRT Associates
5 Nepperhan Avenue, Suite 2B
Elmsford, NY 10523