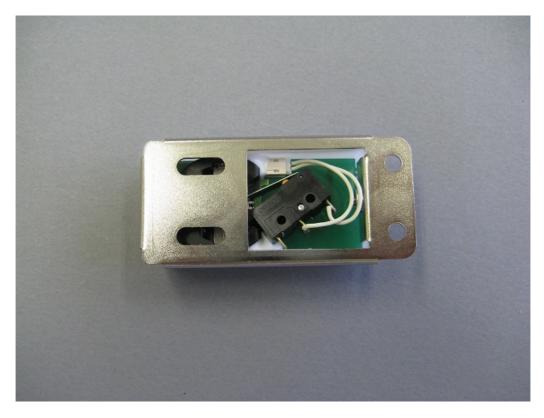


Top



Bottom



Front



Rear



Side 1



Side 2