Fax Destination: Kashifuji Works, Ltd. (Head Quarters Overseas Sales Dept.)

Date

## +81-75-661-5270

Spare Parts	Please select  Quotation	Order	Please fill out the Necessary Information. **indicates required information.	
Full Name%				
Company Name or School ※		Departme	Department	
Phone *	ıe%		Fax	
Address / Zip (Postal)	Code%			
Email				
Enter the end user's	s name if you are a trading c	ompany		
Enter your quotation number.			→ No.	
% Please be sure to	o fill out the Machine Model	and Serial Number	·.	
Machine Model ※		Serial Nu	Serial Number※	
Please fill out the info	rmation below to the best of yo	our knowledge.		
Item	Item No. (Drawing I	No.) Quantity	Notes	
Comments				