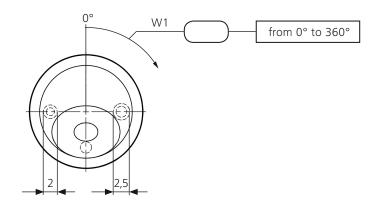
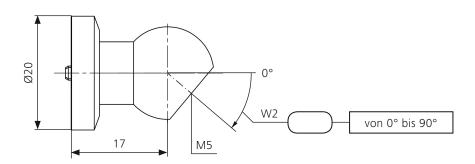
Short spatial angle with ThermoFit Pro adapter / inquiry

Short spatial angle

Quantity: _____





Company		
Department		
Name, First		
Address		
City / Zip		
Phone	Fax	
E-Mail		

Fax inquiry:

Please fill in the specifications into the right fields. Sign the desired quantity into the fields on the top of the page. Print the page.

Send the fax inquiry to:

+49 7361 6336 29

