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REQUEST FOR SAMPLE FUSES

Date:

Representative:

Customer Requesting Samples:

Project Name:

Application:

Potential \$\$:

Annual Usage:

Competitor's part number:

Sales Representative Requesting Samples:

Date Required:

Part Number	Quantity	Part Number	Quantity
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Note/Instruction:

Please:

- a) Use this form for requesting samples.
- b) Note special shipping instructions. All samples will be sent to the Rep's office if the "note/instruction" is blank.