

ФОРМА ЗА ПОРЪЧКА НА ЛЕНТА

ФИРМА:

ДАТА:

АДРЕС:

ФАКС:

ОТГОВАРЯЩ:

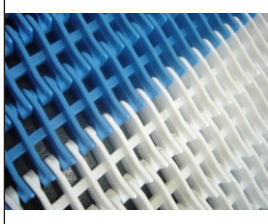
ТЕЛЕФОН:

ДАНИИ НА ЛЕНТАТА

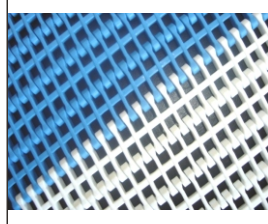
S.2900



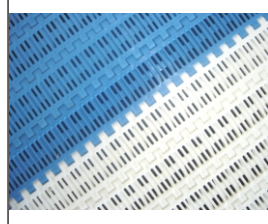
СВРЪХЗАВИШЕНА



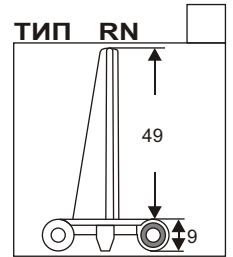
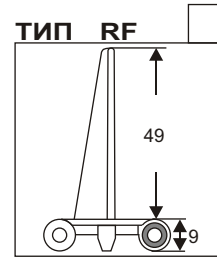
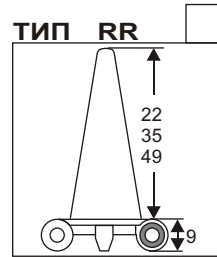
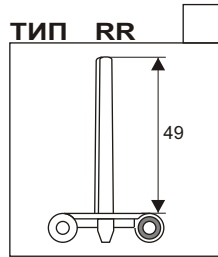
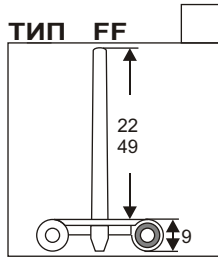
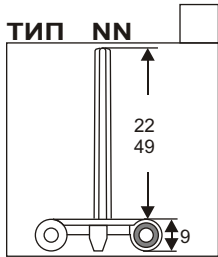
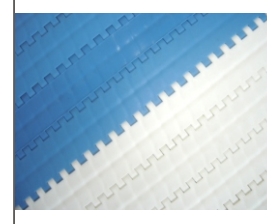
НАДУПЧЕНА



ПОЛУ-НАДУПЧЕНА



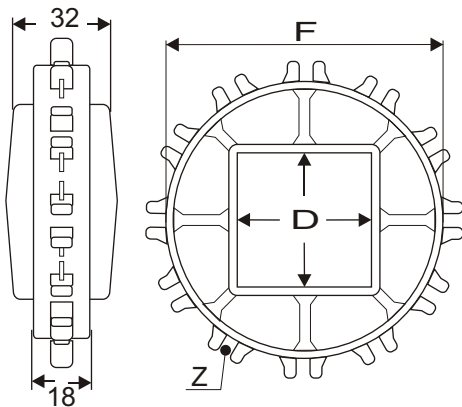
ЗАТВОРЕНА



РАЗМЕРИ	
ШИРИНА.....	mm
ДЪЛЖИНА.....	mm

ЦВЕТОВЕ	
БЯЛО	
СИВО	
ЖЪЛТО	
СИНЬО	
ЗЕЛЕНО	
ЧЕРВЕНО	
БЕЖОВО	

МАТЕРИАЛ	
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PGT	<input type="checkbox"/>
PPGF	<input type="checkbox"/>



Z	F	D	КОЛИЧЕСТВО
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12	90	40	
18	142	40	
22	174	40	

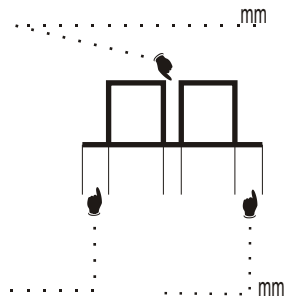
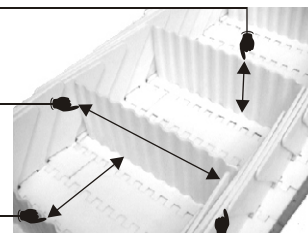
ТИП ЕСКАЛАТОР

ВИСОЧИНА?

ШИРИНА?

РАЗСТОЯНИЕ?

СТРАНИЧНИ КРИЛА?



ЗАБЕЛЕЖКИ

Желаеща дата на получаване:.....