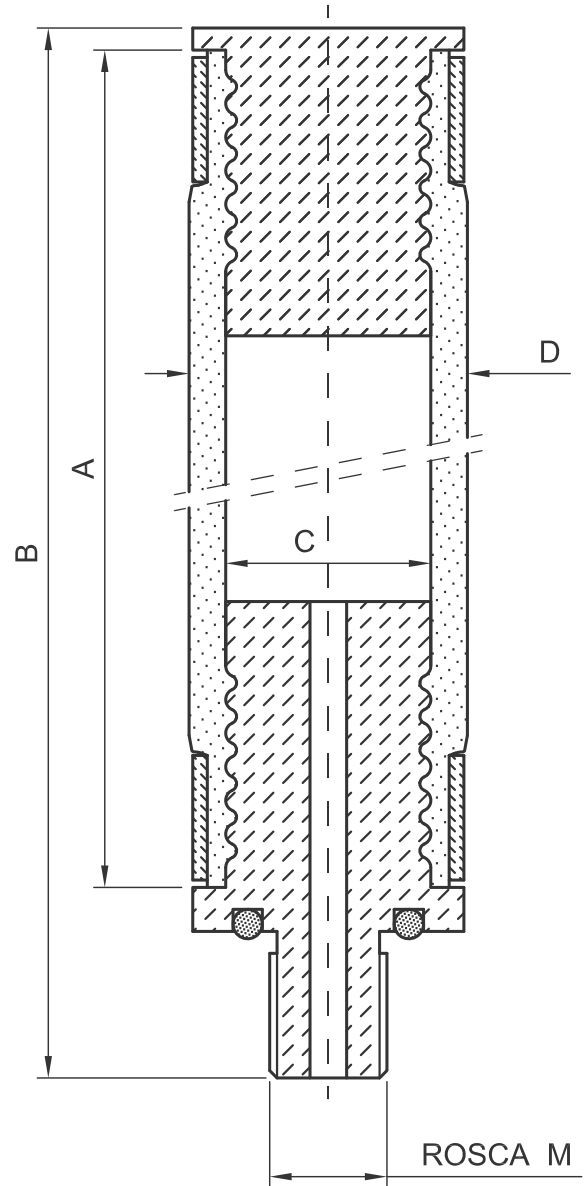
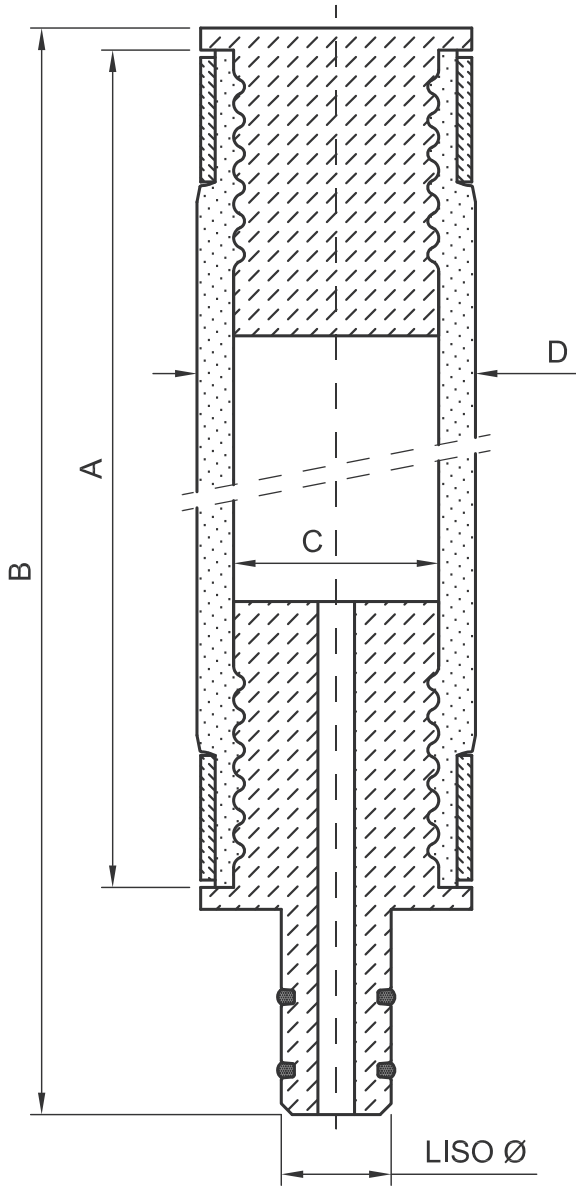


Formulário de Orçamento: CONJUNTO DE ALIMENTAÇÃO DE AR

EMPRESA: _____

CONTATO: _____ CARGO: _____

TEL: (____) _____ FAX: (____) _____ e-mail: _____



LISO				
Nº SÉRIE	A	B	C	D

ROSCA				
Nº SÉRIE	A	B	C	D