



DATE:

<i>Company</i>	<input type="text"/>
<i>Address</i>	<input type="text"/>
<i>Town-County</i>	<input type="text"/>
<i>Nation</i>	<input type="text"/>

**Loss - Theft - Break      Communication**

**DETER BOLT CLASSIC Wrenches**

<i>Description</i>	<i>Serial Code Number</i>	<i>Cause</i>
<i>DETER BOLT CLASSIC wrench</i>		

*Stamp & Signature*

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**Send Documentation**      *fax +39 011 8977730*

**trough fax or e-mail to:**      [info@cagnasso.com](mailto:info@cagnasso.com)      [deterbolt@cagnasso.com](mailto:deterbolt@cagnasso.com)

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