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| --- |
| SENDER COMPANY NAME Sender company address |

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| Date |  | FAX |

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| --- |
| **To:** Recipient name |
| **Phone number:** Recipient phone number |
| **Company name:** Recipient company name |
| **Fax:** Recipient fax number |
| **From:** Sender name |
| **Phone number:** Sender phone number |
| **Company name:** Sender company name |
| **Fax:** Sender fax number |
| **Number of pages:** Number of pages sent |
| **Urgent:** Yes or No |
| **Action requested:** Enter action required |