|  |  |  |
| --- | --- | --- |
|  | **COMPANY NAME** | [Street Address]  [City, State ZIP Code]  [Telephone]  [Fax]  [Web Address] |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| FAX | DATE: | [Enter Date Here] | |
| NUMBER OF PAGES | Page 1 of Pages | |
| TO: | [Recipient’s Name] | |
| FAX: | [Recipient’s Fax] | |
| FROM: | [Sender’s Name] | |
| PHONE: | [Sender’s Phone] | |
| FAX: | [Sender’s Fax] | |
| SUBJECT: | [Enter Subject Here] | |

**Message:**