




# FAX注文書

<div style="border: 2px solid black; padding: 5px; margin-bottom: 5px;"> <div style="border: 1px solid black; height: 150px; width: 100%;"></div> </div> <div style="border: 2px solid black; padding: 5px;"> <div style="border: 1px solid black; height: 350px; width: 100%;"></div> <div style="display: flex; justify-content: space-between; align-items: center; margin-top: 10px;"> <div style="text-align: right;">             搬入日の返信を希望             <div style="margin-left: 10px;"> <input type="checkbox"/> する                 <input type="checkbox"/> しない             </div> </div> <div style="border-top: 1px solid black; width: 100%;"></div> </div> </div>	<div style="border: 2px solid black; padding: 5px; margin-bottom: 5px;"> <div style="border: 1px solid black; height: 150px; width: 100%;"></div> </div> <div style="border: 2px solid black; padding: 5px;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="height: 40px; vertical-align: top; padding: 5px;"> <div style="display: flex; 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送信先  
FAX番号

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