

We specialize in custom cables and would be more than happy to make a cable for you. Simply fill out this form and fax it to us at 514-695-3755. Should you need help with filling in this form please call us at 514-695-2425.

**STEP 1 Please specify the cable type**

- |                                      |                                    |  |                                    |
|--------------------------------------|------------------------------------|--|------------------------------------|
| <input type="radio"/> Unshielded     | <input type="radio"/> Foil Shilded | <input type="radio"/> Foil & Braid Shieled | <input type="radio"/> Other _____  |
| <input type="radio"/> Simplex Fiber  | <input type="radio"/> Duplex Fiber | <input type="radio"/> Solid                | <input type="radio"/> Number _____ |
| <input type="radio"/> 62.5/125 Fiber | <input type="radio"/> 50/125 Fiber | <input type="radio"/> Stranded             | of Pairs _____                     |

**STEP 2 Please specify the connector type**

CABLE LENGTH: \_\_\_\_\_



Connector A Type and Gender		Connector B Type and Gender	
	Gender <input type="radio"/> M <input type="radio"/> F		Gender <input type="radio"/> M <input type="radio"/> F

**Special Instructions**

- One End Cut
- Pairing
- Label: \_\_\_\_\_
- Other: please attach specs.

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**STEP 3 Pin Connection – indicate the Pinout Pinout Chart Example**

Connector A Pin #	Connector B Pin #	Connector A Pin #	Connector B Pin #
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9
10	10	10	10
11	11	11	11
12	12	12	12
13	13	13	13
14	14	14	14
15	15	15	15
16	16	16	16
17	17	17	17
18	18	18	18
19	19	19	19
20	20	20	20
21	21	21	21
22	22	22	22
23	23	23	23
24	24	24	24
25	25	25	25
26	26	26	26
27	27	27	27
28	28	28	28
29	29	29	29
30	30	30	30
31	31		
32	32		
33	33		
34	34		
35	35		
36	36		
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52	52		
53	53		
54	54		
55	55		
56	56		
57	57		
58	58		
59	59		
60	60		
61	61		
62	62		
63	63		
64	64		
65	65		
66	66		
67	67		
68	68		
69	69		

  

**Step 4 Fill out your contact information**

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

State / Province: \_\_\_\_\_

Country: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

PO# \_\_\_\_\_

Signature: \_\_\_\_\_

**Fax to: 514-695-3755 or email to  
katkins@argray.ca**