

**Fostex**



**DECLARATION OF CONFORMITY**

*Type of Equipment(s):* RP Type Headphones  
*Model Number:* T20RPmk3, T40RPmk3, T50RPmk3  
*Manufacturer's Name :* Fostex Company, A Division of  
Foster Electric Company, Limited  
*Manufacturer's Address:* 1-1-109, Tsutsujigaoka, Akishima City,  
Tokyo 196-8550, JAPAN  
*Application of Council Directive(s):* RoHS (2011/65/EU)

*I, the undersigned, hereby declare that the equipment(s) specified above conform(s) to the  
above Directive(s) and Standard(s).*

*Authorised representative in Europe:*

*Place:* Tokyo, Japan  
*Date:* March 17, 2016

*Manufacturer's Signature*

*(Full Name)* Masaki Shimmachi  
*(Position)* Vice President  
*(Company Name)* Fostex Company,  
A Division of Foster Electric Company Limited