**MOTZZ LABORATORY, INC.**

3540 E. Corona Ave.
Phoenix, AZ 85040

Phone: 602-454-2376    Fax to: 602-454-9243

## CLIENT INFORMATION          Date:

**REPORT TO:**

**Company Name:** _____ **.**

**Contact :** _____

**Address:** _____ _____

**City:** _____ **State:** _____ **Zip Code** _____

**Phone:** _____ **Mobile:** _____ **.**

**Fax:** _____ **Email:** _____ **.**

**BILL TO:**

(If the information is the same as above, write 'Same'.)

**Company Name:** _____ **.**

**Contact/Accounts Payable:** _____ _____

**Address:** _____ **.**

**Phone:** _____ **Email:** _____ **.**

**Fax:** _____ **.**

**PO Number:** _____ **.**

**Final report and invoice will be sent via email**