KNOX Laboratory LLC

Company Consortium Information

(Please fill out information and mail or fax to Knox Laboratory)

Company Name: _____ Date: _____

Contact Person _____ Title _____

Address: _____

City / State / Zip: _____

Telephone: _____ Fax: _____

Approximate number of employees: _____

Drivers Names: SSN#

_____

_____

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You will receive a Statement / Invoice after the end of the month. It will be due upon receipt. We appreciate your business.

Please fax back or mail to Knox Laboratory

918-624-2673

Knox Laboratory
5640 South Memorial Drive
Tulsa, Oklahoma 74145
Phone: 918•622•5669 Fax: 918• 624•2673
www.knoxlab.com