MOLD TEST KIT PAYMENT FORM

FOR FASTER RESULTS REGISTER YOUR MOLD TEST KIT ONLINE AT www.prolabinc.com

PLEASE OBTAIN YOUR REGISTRATION NUMBER ONLINE AND WRITE THE NUMBER IN THE SPACE PROVIDED BELOW.

WHEN DONE TESTING THE COMPLETED FORM AND PAYMENT MUST BE RETURNED TO **PRO-LAB®**

MUST BE RETURNED TO PRO-LAB®
TEST LOCATION AND PAYMENT FORM COMPLETE INFORMATION REQUIRED
Online Registration #:
Name:
Test Address:
City:
State: Zip: Zip:
Sample Location:
Date Sample Collected: M M / D D / Y Y
Sample Method (choose one) : 🗆 Settling 🗇 HVAC 🗇 Visual 🗇 Bulk
EMAIL ADDRESS REQUIRED FOR RESULTS
Email:
STANDARD MOLD LAB RESULTS (\$40) OR C EXPRESS MOLD LAB RESULTS (\$55) TOTAL \$
MAKE CHECKS PAYABLE TO PRO-LAB® CHECK # MONEY ORDER CREDIT CARD: Visa Mastercard Discover AMEX
Credit Card #: Exp. Date Credit Card Security Code (3 or 4 digits): M
Phone: -
Name on Card / Check: Image: Control of the control of t
Signature: Date: MM/DD/YY
By submitting your sample to PRO-LAB® for analysis, you authorize PRO-LAB® and/or its affiliate

representatives to contact you regarding your results. PRO-LAB® • 1675 N. COMMERCE PARKWAY • WESTON • FL 33326

MUST BE RETURNED WITH YOUR SAMPLE TO TO PRO-LAB®