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GRIFFIN PRIVATE INVESTIGATIONS

Licensed, Insured & Bonded
CT. & R.I.

CASE # _____ DATE _____

ATTORNEY _____ DATE DUE _____

CLIENT ADDRESS _____

CLIENT PHONE _____

CLIENT CELL PHONE _____

SERVICE REQUESTED _____

SUBJECT OF INVESTIGATION _____

NAME _____

ADDRESS _____

PHONE _____

SUBJECT OF INVESTIGATION (WORK)

NAME _____

ADDRESS _____

PHONE _____

SPECIFIC REQUEST OF
INVESTIGATION _____

SPECIAL CONTACTS _____

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