

MATRIX Document Imaging, Inc.
527 E. Rowland St., Ste 214
Covina, CA 91723
PH: (800) 737-8840 Fax: (626) 966-9975

FAX RATING REQUEST

FAX to: (626) 966-9975 **Date Requested:** _____
Attn: Rating Service
From: _____

New Schedule **Old Schedule**

Name: _____

Occupation: _____

P & S Date: _____ Employer: _____

Date of Birth: _____ Date of Injury: _____

Weekly Gross Earnings: _____

WCAB NO.: _____

Occupation No.: _____

Evaluator: _____ Date of Report: _____

Requested by: _____ Requestor Phone: _____

Requester email: _____ Requestor Fax: _____

Matrix Order # _____

Faxed this form

Faxed copy of medical report to be rated