

Supplement Order Form

Staff Only Called on: _____ Left message on: _____
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Name _____ Date _____ Phone number _____

We will call you as soon as your full order is in.

Orders are placed on the first Wednesday of every month. All order must be turned in by 6:00pm Monday or they will not be processed for Wednesday's order. NO EXCEPTIONS! This enables us to order first thing Wednesday morning to get the quickest shipping times.

Provide the company name, supplement name, dosage (if applicable), capsule count, and quantity of bottles wanted.

*****If we do not have enough information to identify the product you want, we will not order the product.**

Example: Company Integrative Product CoQ10 maple flavor Dosage (mg) 200mg Qty in bottle 90 caps Qty of bottles 1

Company _____	Product _____	Dosage _____	Qty in bottle _____	Qty of bottles _____
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Company _____	Product _____	Dosage _____	Qty in bottle _____	Qty of bottles _____

We will hold your products for 30 days after you are notified that your order is in. After that they will be placed back on the shelf. If you do not pick up your special order products we will not order for you in the future.