

MicroNutra Health Inc. 1022 Nevada Highway PMB: 358 Boulder City, NV 89005 USA

Mail & Fax Order Form

For Credit Cards: fill out this order form and fax to us at 702-543-1405 (USA).

For Check or Money Orders: fill out this order form and mail along with your payment to the address above,

To insure that we receive your order it would be best to send it by certified mail.

SHIPPING ADDRESS	Addre City:_ State Count Conta	ess 1 ess 2 /Pro try:	1: 2: ovince/Zip: Number:	BILLING ADDRESS IF DIFFERENT	Ac C St C	ddress 1:_ddress 2:_ ity:tate/Proviountry: eceived Da	nce/Zip:			
PLEASE CIRC CREDIT CAR TYPE			CREDIT CARD NUMBER	EXP DATE		CVV 3-4 DIGIT CODE	CHECK OR MONEY ORDER # (US Funds only)		DRIVER'S LICENSE # & STATE (check orders only)	
VISA MASTCA AMEX DISCOV										
Q ⁻	ГҮ	PACKAGE/DESCRIPTION			TOTAL QUANTITY UNIT PRICE			LINE TOTAL		
	S	Single Bottle of Claritose™				1 Bottle			\$67.00	
	В	Buy 2 bottles of Claritose™ and get 1 bottle FREE!				3 Bo	Bottles		\$134.00	
	В	Buy 3 bottles of Claritose™ and get 2 bottles FREE!				5 Bottles			\$201.00	
	В	Buy 5 bottles of Claritose™ and get 5 bottles FREE!				10 Bottles			\$335.00	
ORDER TOTAL Please note the following conditions:									ORDER TOTAL	
All check orders are held for 10 business days to clear. Money and credit card orders are processed immediately. International money orders accepted.						USA & INTERNATIONAL SHIPPING CHARGE Please allow 4-7 business days USA orders. Please allow 7-10 business days International orders.				\$9.95
TOTAL SALE									TOTAL SALE	