

ORDER FORM

BILL TO:			
Name:	Telephone:		
Organization:	Fax:		
Address:	City:		
Address:	_ State:	Zip	Code:
E-mail:			
Please include your e-mail address for notification of shipment. "Yes, I would like to receive emails about the FREE NuBites Tipsheets and NEW nutrition education materials."			
SHIP TO: same as billing address			
Name:	Telephone:		
Organization:	Fax:		
Address:	City:		
Address:	State:	Zip Code:	
Quantity Code Number Name of Product		Item Pri	ce Total Cost
		Subtotal:	I
SHIPPING AND HANDLING:		Shipping &	
Orders up to \$25 Add \$10.00 Orders \$1,000 - \$1,999 Add 12 Orders \$25 - \$75 Add \$18.00 Orders \$2,000 - 2,999 Add 11		Handling:	
Orders \$76 - \$199 Add \$25.00 Orders \$3,000 - \$3,999 Add 10		TOTAL:	
Orders \$200 - \$699 Add 15% Orders over \$4,000 call for pricing Orders \$700 - \$999 Add 13%			
— For orders to Alaska, Hawaii, US Territories or International call for pricing.		Mail ord Nutrition Ma	
Pro	We can Ovide a free,	316 North Bars	•
	obligation quote	Eau Claire,	
Check (payable to Nutrition Matters, Inc.)	email us at	Fax order to: 7	
Purchase Order #	8-356-5575	E-mail o sales@numo	
Credit Card (MasterCard, Visa or American Express)		Or call us at:	
Card Number:		toll free: 888	
Exp. Date: CVC (Card Verification Code):		or order o	
Signature: Date:	_	www.numa	tters.com