Holistic Family and Pets

DATE	P.O. Number

Ordered By:
Street: City/State/Zip: Phone: eMail:

Ship To:
Street: City/State/Zip: Phone: eMail:

Payment Method / Net 30

Shipping Method:

☐ Visa ☐ Master Card ☐ American Express ☐ Discover ☐ Check or money order enclosed (no C.O.D. please)

Credit Card Number: Expiration Date Card Security Code

ITEM NO.	DESCRIPTION	QTY PACKS	PRICE	AMOUNT

Checks returned unlpaid by your financial institution are soubject to a Service Charge of $25 or the maximum allowed by law. Checks returned for insufficient or uncollected funds, together with Service Charges, may be debited to lyour account.

MERCHANDISE TOTAL	
FREIGHT	
ADD SALES TAX	
TOTAL:	

Signature (required on all credit card orders)