

Tel: (800) 667-9723



Fax (866) 667-9723

"Working together for a better community" ®

275 Rocky Lake Drive • Unit 5 Bedford, NS • B4A 2T3 • Canada

NEW ORDER REORDER REORDER (with changes) Acct # _____

Secure Prescription Forms - Fax order form to (866) 667-9723

DEA/PRACT. NO. _____ PRINT LICENSE NO. _____ PRINT

NAME 1 _____

NAME 2 _____

ADDRESS 1 _____

ADDRESS 2 _____

CITY _____ STATE/PROV _____ ZIP/POST _____

PHONE _____ FAX _____ PRINT

An email confirmation will be sent to you upon shipping.

EMAIL ADDRESS _____ NPI # _____ PRINT

GREEN 1 PART COUNTERFEIT-RESISTANT PRESCRIPTION FORMS

# OF PADS	PRICE PER PAD	# OF SCRIPTS	NET PRICE	SHIPPING	TOTAL	ORDER
20	\$ 2.55	2000	\$ 50.95	\$ 8.93	\$ 59.88	<input type="checkbox"/>
40	\$ 2.40	4000	\$ 95.95	\$ 9.93	\$ 105.88	<input type="checkbox"/>
80	\$ 2.29	8000	\$ 182.95	\$ 11.93	\$ 194.88	<input type="checkbox"/>
128	\$ 2.08	12800	\$ 265.95	\$ 12.93	\$ 278.88	<input type="checkbox"/>
200	\$ 1.92	20000	\$ 384.95	\$ 23.93	\$ 408.88	<input type="checkbox"/>
500	\$ 1.84	50000	\$ 920.95	\$ 44.93	\$ 965.88	<input type="checkbox"/>

GREEN 2 PART (CARBONLESS) COUNTERFEIT-RESISTANT PRESCRIPTION FORMS

# OF PADS	PRICE PER PAD	# OF SCRIPTS	NET PRICE	SHIPPING	TOTAL	ORDER
24	\$ 3.75	1200 x 2	\$ 89.95	\$ 8.93	\$ 98.88	<input type="checkbox"/>
48	\$ 3.60	2400 x 2	\$ 172.95	\$ 9.93	\$ 182.88	<input type="checkbox"/>
120	\$ 3.47	6000 x 2	\$ 415.95	\$ 12.93	\$ 428.88	<input type="checkbox"/>
200	\$ 3.21	10000 x 2	\$ 641.95	\$ 24.93	\$ 666.88	<input type="checkbox"/>
500	\$ 2.83	25000 x 2	\$ 1412.95	\$ 49.93	\$ 1462.88	<input type="checkbox"/>
1000	\$ 2.54	50000 x 2	\$ 2542.95	\$ 89.93	\$ 2632.88	<input type="checkbox"/>

8 1/2" x 11" - COUNTERFEIT-RESISTANT PRESCRIPTION FORMS

# OF SHEETS	NET PRICE	SHIPPING	TOTAL	ORDER
2000	\$ 150.00	\$ 19.95	\$ 169.95	<input type="checkbox"/>
5000	\$ 310.00	\$ 29.95	\$ 339.95	<input type="checkbox"/>
10000	\$ 545.00	\$ 44.95	\$ 589.95	<input type="checkbox"/>
20000	\$1024.00	\$ 74.95	\$ 1098.95	<input type="checkbox"/>

Pre-printed 8 1/2" x 11"
Blank Secure 8 1/2" x 11"

Make of Printer *Required*

NS, NF, NB residents please add 7%

EXPRESS PACK (4 business day service) 20 pads ADD \$45.00

METHOD OF PAYMENT - VISA / M/C / CHECK INCLUDED

Card Number _____ Expiry Date _____

Cardholder's Signature _____ Date _____

"Prices subject to change"