

ORDER FORM

1. **Yes!** Please send me OURAVITA2000 beverage indicated below. I have read the ordering instructions and agree to all applicable terms and conditions.

Signature _____

2. Billing Information

Date _____

3. Shipping Information.

(If different from billing information)

First Name Initial Last

First Name Initial Last

Company/Business Name

Company/Business Name

Address Bldg

Address Bldg

City State

City State

Country ZIP/Postal Code

Country ZIP/Postal Code

Telephone FAX

Telephone FAX

4. Item Selections.

Stock No	Description	Quantity	Unit Price	Total
2001	RED Regular: 500ml / 6 Pak		\$ 15.00	
2011	WHITE Regular : 500ml / 6 Pak		15.00	
2002	RED Regular : 1.0 L / 6 Pak		22.50	
2012	White Regular: 1.0 L / 6 Pak		22.50	
2101	RED Sparkling : 500ml / 6Pak		17.50	
2111	WHITE Sparkling: 500ml / 6 Pak		17.50	
2102	RED Sparkling : 1.0 L / 6 Pak		25.00	
2112	WHITE Sparkling : 1.0 L / 6 Pak		25.00	
2021	MIXED Regular: 500ml / 6 Pak		16.50	
2121	MIXED Sparkling : 500ml / 6 Pak		19.00	
2022	MIXED Regular: 1.0 L / 6 Pak		24.00	
2122	MIXED Sparkling : 1.0 L / 6 Pak		26.50	

Sales Total \$ _____

5. Payment Method

a. **Credit Card** : VISA MASTERCARD Discover
 Account No. _____
 Exp. Date _____

b. **Check or Money Order enclosed with order.**
 (Sorry, no cash or C.O.D.'s)

6. Shipping & Handling

7. Express Delivery

8. International

(Add 30% of Sales Total)

9. California Residents

(Add 7.5% Sales Tax)

10. **Order Total**(U.S. Funds Only) \$ _____