



CelsusHealth
"COLLABORATIVELY ADVANCING MEDICINE"

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Bloomfield, NJ 07003
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(f) 800-948-8049

ORDER FORM:

DATE: _____ **PO#:** _____

BILL TO: _____ **SHIP TO:** _____ (PLEASE CHECK IF SAME AS BILL TO)

| | |
|------------------------------|------------------------------|
| PRACTICE NAME: _____ | PRACTICE NAME: _____ |
| PHYSICIAN NAME: _____ | PHYSICIAN NAME: _____ |
| ADDRESS: _____ | ADDRESS: _____ |
| _____ | _____ |
| STATE/ZIP: _____ | STATE/ZIP: _____ |
| PHONE: _____ | PHONE: _____ |
| FAX: _____ | FAX: _____ |
| EMAIL: _____ | EMAIL: _____ |

CONTACT NAME: _____

KINDLY SELECT AMOUNT OF VIALS BELOW:

| | | | |
|-----------------------------|-------------|----------------|-------------------|
| MINIMUM ORDER VIALS: | 15 | \$28.25 | \$423.75 |
| | 25 | \$28.00 | \$700.00 |
| | 35 | \$27.85 | \$974.75 |
| | 45 | \$26.00 | \$1,170.00 |
| | 55 | \$25.25 | \$1,388.75 |
| | ≥ 65 | \$25.00 | \$1,625.00 |

QTY: _____ \$ _____ **PLEASE SELECT FROM ABOVE**

QTY: _____ X **\$25.00** = \$ _____ **THIS CAN BE ANY QUANTITY OVER 65 VIALS**

SHIPPING & HANDLING:(FedEx 2 day Saver \$20.00) **\$ 20 / 30** **Please choose 2 day (\$20.00), or Overnight (\$30.00)**
(FedEx Overnight \$30.00)

Orders 65 or more vials = Free Ground Shipping \$ **FREE**

TOTAL: _____ \$ _____ \$ _____ **CALCULATE TOTALS**

ORDERS OVER 65 VIALS WILL RECEIVE FREE GROUND SHIPPING.

ORDERS OVER 105 VIALS WILL GET 5% OFF FUTURE REORDER.

A STAFF MEMBER OF CELSUS HEALTH WILL CONTACT YOU TO COLLECT PAYMENT INFORMATION AND TO CONFIRM YOUR ORDER PRIOR TO SHIPPING.

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