

# PURCHASE ORDER

### Bill to:

Contact Name \_\_\_\_\_  
 Company \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Fax Number \_\_\_\_\_

### Ship to:

Contact Name \_\_\_\_\_  
 Company \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

### Deliver to:

Receiving \_\_\_\_\_

Date	Customer No.	P.O. No.	Sales Rep

### Ship Via

### Available Shipping Options:

- UPS
- USPS
- Freight

### Payment Method

- New Credit Card (see separate form for details)  
 We accept the following credit cards:
- MasterCard
  - Visa
  - American Express
- Card on File (list last 4 digits)
- Wire Transfer
- ACH Transfer



Please blind ship to the address above.

↑ Please ask if blind shipping is compatible with your account needs before checking this box. Export products have specific lot and expiration requirements. Notify your sales agent if you will ship out of the USA.

### Private Label Only Section

Item #	Vitalabs Stock Name (& Potency)	How Many Tablets or Capsules Per Bottle	Private Label Name	Bottle Type (check one)						Add In-House Specialty Labels	How Many Bottles	Price Per Bottle	Sub Total
				Standard Bottle (Stock)	Colored Bottle (upcharge)	Add Locktop Lid	Add Desiccant	Add Fliptop Lid					
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

\*See Sales Rep For Details, Pricing Varies on Sizes

**Other Comments or Special Instructions**

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**Total**

\_\_\_\_\_  
 Authorized Signature