



BIO ESSENCE

HERBAL ESSENTIALS

ORDER FORM

2265 Polvorosa Ave, Ste 310, San Leandro, CA 94577

Toll-free number: 1(800) 538-1333

(24hrs.) Toll-free fax: 1(800) 875-0798

Mon.-Fri. 9:00 am – 5:00 pm (PST)

ORDER DATE: 20___/___/___

BILL TO:

Customer Code: _____

First Time Order: Yes _____ No _____

First Name: _____

Last Name: _____

Business Name: _____

E-Mail: _____

Phone No.: _____

Fax No.: _____

Address: _____

City: _____ State: _____ Zip Code: _____

SHIP TO (IF DIFFERENT):

Address: _____

City: _____ State: _____ Zip Code: _____

Item Number	Product Name (Optional)	QTY	Item Number	Product Name (Optional)	QTY

*California Sales Tax 9.5% applies if you do not have a valid California Resale Permit.
 *If ordering Customized Formula in Capsules, please use separate order for other items that need to be sent right away since encapsulation process takes a few days to finish. We will combine the total amount to calculate the discount and shipping fees for all orders placed at the same time.

Method of Payment

Credit Card: Visa Master Card Discover
 Card #: _____ Expiration Date: ____/____ Security 3 digits code: _____

COD , Check (upon credit approval)

Quantity Discounts (Total Order Transaction)

5% discount for order over \$250; 10% discount for orders between \$500 - \$1000; 15% discount for orders over \$1000

Shipping Policy

*UPS Ground / Priority Mail delivery charged by actual cost of weight, 50% discount if order over \$250
 *FREE shipping when order over \$500.
 *Order less than 3 lbs., may be delivered by Priority Mail at a lower cost.

Thank you for your business