

# Pharmacy Order Form



## Eastside Natural Health Clinic

2188 S. Highland Dr, Ste 207, SLC, UT, 84106

Tel: (801) 474-3684 Fax: (801) 474-3604

eastsidenaturalhealth.com

Patient Name \_\_\_\_\_ Date \_\_\_\_\_

Daytime Phone (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Shipping Address:

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip

### Credit Card Billing Information:

VISA MASTERCARD (only)

Credit Card #

Expiration Date / 3-digit code on back of card \_\_\_\_\_

Signature \_\_\_\_\_

Ordering Information Product	Quantity	Total

If you have any new health concerns or symptoms, please describe your symptoms below or call us.

Product Total	
Tax 6.8%	
Shipping - Add \$7	
Grand TOTAL	

If you'd like to pick up your order at the clinic, please call and do not include shipping costs.