

OPTIFAST® Nutrition Products Order Form

Name: _____

Date: _____

Treatment Week: _____ Total Number of Servings Needed: _____

We strive for excellence and accuracy when filling your product orders. Unfortunately, mistakes can happen. We ask that you please check your order before leaving the center. **Due to strict standards, no adjustments or exchanges can be made once the order leaves the building.** Thank you for your understanding and cooperation.

OPTIFAST 800® Drink Mix
7 servings per carton # of cartons

Chocolate _____
Vanilla _____
Strawberry _____

OPTIFAST800® Ready to Drink
27 briks per case # of briks

Chocolate _____
French Vanilla _____
Strawberry _____

OPTIFAST 800® Soup Mix
7 servings per carton # of cartons

Chicken _____
Garden Tomato Flavor _____

OPTIFAST 800® Nutrition Bars
7 servings per carton # of cartons

Chocolate _____
Peanut Butter Choc. _____
Berry with Yogurt _____

Total Product order: _____ **Servings OPTIFAST 800**
_____ **Servings Nutrition Bars**

Nutritional Products Order Form

Name _____ Week _____ Total Servings _____

OPTIFAST 800®	OPTIFAST 800®	OPTIFAST 800®	OPTIFAST 800®	OPTIFAST®
<i>Drink Mix</i>	<i>Ready to Drink</i>	<i>Soup Mix</i>	<i>Bars</i>	<i>Nutrition Bars</i>
7 servings per carton	Sold per brik	7 servings per carton	7 bars per carton	sold individually

_____ Chocolate	_____ Chocolate	_____ Chicken	_____ Chocolate	_____ Peanut Butter
_____ Vanilla	_____ French Vanilla	_____ Garden Tomato	_____ P.B. Chocolate	
_____ Strawberry	_____ Strawberry		_____ Berry with Yogurt	

Hot N Slim® Soup
24 servings per carton

_____ Chicken Flavor

TOTAL ORDER

_____ Servings OPTIFAST 800

_____ Servings Nutrition Bars

__ Servings Hot 'N Slim

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Nutritional Products Order Form

Name _____ Week _____ Total Servings _____

OPTIFAST 800®	OPTIFAST 800®	OPTIFAST 800®	OPTIFAST 800®	OPTIFAST®
<i>Drink Mix</i>	<i>Ready to Drink</i>	<i>Soup Mix</i>	<i>Bars</i>	<i>Nutrition Bars</i>
7 servings per carton	Sold per brik	7 servings per carton	7 bars per carton	sold individually

_____ Chocolate	_____ Chocolate	_____ Chicken	_____ Chocolate	_____ Peanut Butter
_____ Vanilla	_____ French Vanilla	_____ Garden Tomato	_____ Peanut Butter Chocolate	
_____ Strawberry	_____ Strawberry		_____ Berry with Yogurt Coating	

Hot N Slim® Soup
24 servings per carton

_____ Chicken Flavor

TOTAL ORDER

_____ Servings OPTIFAST 800

_____ Servings Nutrition Bars

__ Servings Hot 'N Slim

Product Order Form

Name: _____ **Date:** _____

Product Name	Sold by units	Quantity	Price Each	Total
OPTIFAST 800® Drink Mix				
Chocolate	7 per carton			
Vanilla	7 per carton			
Strawberry	7 per carton			
OPTIFAST 800® Ready To Drink				
Chocolate	1 brik			
French Vanilla	1 brik			
Strawberry	1 brik			
OPTIFAST 800® Soup Mix				
Chicken Flavor	7 per carton			
Garden Tomato	7 per carton			
OPTIFAST 800® Bar				
Chocolate	7 per carton			
Peanut Butter Chocolate	7 per carton			
Berry with Yogurt Coating	7 per carton			
OPTIFAST® Nutrition Bar				
Peanut Butter	1 bar			
OPTIFAST HP® Formula				
Chocolate	6 per carton			
Vanilla	6 per carton			
Hot 'N Slim® Soup				
Chicken Flavor	24 per carton			
Totals				