



Natural Relief Inc.

P.O. Box 28253
Columbus, OH 43228

Email: sales@natrelief.com

Website: <http://www.natrelief.com/>

Retail Order Form

Date: _____

Supplements Ordered By: _____

Mailing Address: _____

Telephone Number: _____ Contact Person: _____

Requested Supplement	Quantity	Price
BP NatRelief	(\$34)	
Anxiety NatRelief	(\$34)	
Edema NatRelief	(\$34)	
Constipation NatRelief	(\$34)	
Cholesterol red yeast rice & CoQ10 NatRelief	(\$34)	
Vitamin D3 (240 Soft gels)	(\$16)	

Ohio Sales Tax (7.5): _____

Total: _____

SHIPPING:

First Class: 1 – 3 Bottles: \$4.00 4 – 6 Bottles: \$6.00 7 -12 Bottles: \$15
13 and more calculated on shipping.

OHIO RESIDENTS MUST INCLUDE 7.5% SALES TAX FOR ORDER TO PROCESS

PLEASE MAKE CHECKS PAYABLE TO NATURAL RELIEF INC.

ORDERS WITH OUT PAYMENT WILL NOT BE PROCESSED

**PAYMENTS CAN BE MADE WITH A CHECK OR CREDIT CARD NUMBER WRITTEN ON ORDER
FORM WITH SIGNATURE**