



Mail Order Form

Date: ____/____/____

Cardio Restore
15050 Cedar Ave #116 - 313
Apple Valley, MN 55124

Package:

| | |
|---|--|
| <input type="checkbox"/> Maintenance Package – \$59.95 | <input type="checkbox"/> Chelation Combo Package – \$199.95 |
| <input type="checkbox"/> Supplement Package - \$34.95 | <input type="checkbox"/> Companion Chelation Pack – \$249.95 |
| <input type="checkbox"/> Maintenance Plus Package – \$89.95 | <input type="checkbox"/> Companion Pack Plus – \$269.95 |
| <input type="checkbox"/> Chelation Pack – \$149.95 | <input type="checkbox"/> Companion Combo Pack – \$329.95 |
| <input type="checkbox"/> Chelation Plus Package – \$169.95 | <input type="checkbox"/> Mega Chelation Pack - \$349.95 |

Shipping:

- USPS Priority Mail - \$7.95 ~ 2-5 days delivery
- USPS Express Mail - \$39.95 ~ 1-2 days delivery
- FedEx Standard Overnight - \$49.95 ~ 1 day delivery

TOTAL: \$_____ (Including shipping)

FIRST NAME: _____

LAST NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____

ZIP: _____

TELEPHONE NUMBER: _____

E-MAIL ADDRESS (optional): _____

NOTES/COMMENTS:

