For direct order to Nu Skin USA

ORDER FORM

FAX: 1-801-345-2850

PV for the month of ____

DATE: ____ / ____ / ____

DISTRIBUTOR ID: ____ NAME: ____

CREDIT CARD: ❑ VISA ❑ MasterCard ❑ AMEX

CARD NUMBER: ____ / ____ / ____ / ____ EXP: ____ / 20 ____

CARD HOLDER NAME: ____

SHIP TO

NAME: ____ OPAS # ____

↑ Your OPAS ID#

ADDRESS: **6600 NE 78TH CT. #A3**
PORTLAND, OR 97218

PHONE: **(503) 262-7036**

ITEM NO.	DESCRIPTION OF PRODUCT	QTY.	UNIT PRICE	SUB TOTAL
	Shipping & Handling in USA	——	————	

TOTAL