ORDER FORM

SOLD TO

❑ My address has changed. ❑ This is the first time I've ordered from SVO.

NAME _____

ACCOUNT # _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

CATALOG CODE (located in address box on back cover) _____

PHONE (for questions about your order) _____

BEST TIME TO CALL _____

E-MAIL ADDRESS _____

It is **OK** to send me "e-mail alerts" ❑ **YES,** please do! ❑ No thanks.

E-mail alerts are short messages we send to our customers to keep them informed of special promotions, special pricing, rebates and more. If you sign up and are not pleased with this service, you may easily unsubscribe at any time. We DO NOT sell our e-mail address lists.

SHIP TO

(Please complete if different from address above)

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

Our friendly Customer Care Team is eager to assist you with your order. Phone orders are taken from 8:00 a.m. to 5:00 p.m. (CT), Monday through Friday. Phone orders can be charged to your Visa, MasterCard or Discover card or shipped C.O.D.

PHONE
TOLL FREE
877/608-3877

2 Ways to order using this form

FAX
TOLL FREE
877/223-3783

or

MAIL
Stearns Veterinary Outlet Store
PO Box 190
Melrose, MN 56352

— REMINDER —
All orders for prescription products must be accompanied by a prescription form which has been filled out by your veterinarian. Please go to "Ordering Prescriptions" on our web site for information on how to order prescriptions and print a prescription form for your veterinarian to fill out.

ITEM #	DESCRIPTION	PAGE #	SIZE	QTY	FOB Weight	UNIT PRICE	TOTAL AMOUNT	TOTAL FOB WT

Occasionally, we may be unable to ship an item at the time we receive your order. If this occurs, should we:

❑ Substitute an equivalent product?
❑ Backorder and ship to you within 14 days?
❑ Call to notify you and you can decide at that time?
❑ Cancel that portion of your order?

We work hard to meet the needs of our customers and value their comments or suggestions. Please indicate additional products you would like us to offer in our catalog.

_____

_____

_____

_____

SUBTOTAL	
Orders under $75.00 add $5.00 (see page 75)	
FOB Item Charge Total (see page 74)	
(H) Hazardous Shipping Fee Total (see page 75)	
C.O.D. add $7.50 per package (see page 75)	
Minnesota Residents Add 6.5% Sales Tax	
(Please pay this amount) **TOTAL**	

Thank you for your order!

PAYMENT METHOD

❑ Check enclosed

Personal or business checks are deposited immediately and, unless you are an established customer, orders will be held for 10 business days until your check clears the bank. All returned checks will be assessed the allowable state service fee.

❑ Money Order enclosed

❑ Visa
❑ MasterCard
❑ Discover

Credit Card # _____

Expiration Date: _____ Validation Code: _____
(Can be found on backside of credit card.)

Cardholder Name: _____

Cardholder Signature: _____

❑ Farm Plan Card # _____ Cardholder Signature: _____

Our promise...
We will match *any* current advertised price on *any* large-animal-health product in our inventory.

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