



VALE PRODUCTS

Order Date: ____/____/____
 Ship Date: ____/____/____
 Order Taken By: _____ Rep: _____

CUSTOMER NAME: _____ CUSTOMER #: _____
 CONTACT: _____
 ADDRESS: _____
 CITY: _____ ST: ____ ZIP: _____
 TELEPHONE: _____
 EMAIL: _____ WEBSITE: _____

New Account? **Y / N**

TERMS _____

Product Description	Item No	Quantity	Price	Extended Price
Solution - Orange	VSO			
Solution - Tropical Punch	VST			
Perma-Clean	VPC			
Daily Cleansing Formula	VDCF			
One-Hour Formula - Citrus	VOHFC			
One-Hour Formula - Island Punch	VOHFI			
Triple Strength	VOHX			
Solution 4x - Citrus Burst	VS4X			
Fiberboost	VFB			
Prevale	VPV			
All Herbal Natural Tea	VHT			
Original Formula Cherry	VOFC			
Original Formula Lemon	VOFL			
Original Formula Orange	VOFO			
Original Formula Grape	VOFG			

____ Boxes @ ____ lbs
 ____ Boxes @ ____ lbs
 ____ Boxes @ ____ lbs
 ____ Boxes @ ____ lbs
 TOTAL WEIGHT ____ lbs

Special Instructions:

ZONE: _____
 SHIP VIA: _____

SUBTOTAL	
TOTAL FREIGHT	
COD	
Insurance	
Subtotal	
TOTAL	