

# MONTHLY INSTALLMENTS

## NSA PREFERRED CUSTOMER AUTOMATIC REORDER

For questions concerning this program call: 1-800-347-6350

Today's Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

NSA Distributor Name: (please print) \_\_\_\_\_

FIN:

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Preferred Customer Name: (please print) \_\_\_\_\_

Shipping Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Phone: (\_\_\_\_) \_\_\_\_\_ Customer E-mail Address: \_\_\_\_\_

Evening Phone: (\_\_\_\_) \_\_\_\_\_

**Please Circle Method of Payment:** VISA MC AMEX DISCOVER JCB BANK DRAFT\*\*

Acct#: 

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 Expiration Date: \_\_\_\_\_

or

\*\*Bank Acct#:

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Routing#:

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### Billing Information:

☐ Same Information as above

Print Name as on Account: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cardholder's Telephone: (\_\_\_\_) \_\_\_\_\_

PLEASE CIRCLE ASAP **OR** INDICATE THE DATE YOU WISH TO HAVE YOUR FIRST ORDER PROCESSED.

ASAP (Order will be processed today or the following business day) **or** Date to process \_\_\_\_/\_\_\_\_/\_\_\_\_ .

I would like my order shipped every ☐ 2 mo. or ☐ 4 mo. and charged to my credit card or drafted on my bank account.

If 2 mo. is selected, your preferred price will double. I understand that I will be receiving product every 2 or 4 months.

Signature \_\_\_\_\_

Quantity	Item	Preferred 4-month Installment Price*
	Juice Plus+® Capsules (4 Bottles Garden Blend, 4 Bottles Orchard Blend)	41.50
	Juice Plus+® Chewables (4 Bottles Garden Blend, 4 Bottles Orchard Blend)	22.50
	JP+ Gummies® (4 Jars Per Carton)	22.50
	Juice Plus+ Vineyard Blend® (4 Bottles Per Carton)	26.50
	Juice Plus+ Complete® <input type="checkbox"/> Van. <input type="checkbox"/> Choc. <input type="checkbox"/> Variety (60 Servings)	27.50
	Juice Plus+ Complete® <input type="checkbox"/> Van. <input type="checkbox"/> Choc. <input type="checkbox"/> Variety (120 Servings)	53.75
	Juice Plus+ Thins® <input type="checkbox"/> Choc. Fudge <input type="checkbox"/> Apple Cinn. <input type="checkbox"/> Variety (8 Bottles Per Carton)	27.50
NSA to Calculate Sales Tax (if applicable)		x
Monthly Installment Total		



Fax your order to: 901-850-3061  
Mail your order to:  
NSA Preferred Customer Reorder  
140 Crescent Drive  
Collierville, TN 38017-3374

\* Price includes shipping and handling. Prices subject to change.

**PAYMENT IN FULL**  
**NSA PREFERRED CUSTOMER AUTOMATIC REORDER**

For questions concerning this program call: 1-800-347-6350

Today's Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

NSA Distributor Name: (please print) \_\_\_\_\_

FIN:

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Preferred Customer Name: (please print) \_\_\_\_\_

Shipping Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Phone: (\_\_\_\_) \_\_\_\_\_ Customer E-mail Address: \_\_\_\_\_

Evening Phone: (\_\_\_\_) \_\_\_\_\_

**Please Circle Method of Payment:**    VISA    MC    AMEX    DISCOVER    JCB    BANK DRAFT\*\*

Acct#: 

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 Expiration Date: \_\_\_\_\_

or

\*\*Bank Acct#:

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Routing#:

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**Billing Information:**

☐ Same Information as above

Print Name as on Account: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cardholder's Telephone: (\_\_\_\_) \_\_\_\_\_

PLEASE CIRCLE ASAP **OR** INDICATE THE DATE YOU WISH TO HAVE YOUR FIRST ORDER PROCESSED.

ASAP (Order will be processed today or the following business day) **or** Date to process \_\_\_\_/\_\_\_\_/\_\_\_\_

The total order including tax and freight will be shipped and charged to my credit card or drafted on my account at the frequency checked:

☐ every month

☐ every 2 months

☐ every 3 months

☐ every 4 months

Signature \_\_\_\_\_

Quantity	Item	Preferred Price*
	Juice Plus+® Capsules (4 Bottles Garden Blend, 4 Bottles Orchard Blend)	156.00
	Juice Plus+® Chewables (4 Bottles Garden Blend, 4 Bottles Orchard Blend)	80.00
	JP+ Gummies® (4 Jars Per Carton)	80.00
	Juice Plus+ Vineyard Blend® (4 Bottles Per Carton)	96.00
	Juice Plus+ Complete® <input type="checkbox"/> Van. <input type="checkbox"/> Choc. <input type="checkbox"/> Variety (60 Servings)	100.00
	Juice Plus+ Complete® <input type="checkbox"/> Van. <input type="checkbox"/> Choc. <input type="checkbox"/> Variety (120 Servings)	200.00
	Juice Plus+ Thins® <input type="checkbox"/> Choc. Fudge <input type="checkbox"/> Apple Cinn. <input type="checkbox"/> Variety (8 Bottles Per Carton)	100.00
Merchandise Total		
Shipping and Handling (Continental US, \$6.00 per item) (AK, HI, PR, GU, US Virgin Islands, \$7.50 for first carton, \$6.00 per additional carton)		
NSA to Calculate Sales Tax		X
Order Total		



Fax your order to: 901-850-3061  
Mail your order to:  
NSA Preferred Customer Reorder  
140 Crescent Drive  
Collierville, TN 38017-3374

\* Prices are subject to change.