


Practitioner Signature:	TEL:	<p align="right"><b>BET LABS PRO2 TEST</b>  1501 Bull Lea Rd.  Suite 102  Lexington, KY 40511-1209  Phone 859/273-3036  <a href="http://www.BETPRO2TEST.BIZ">www.BETPRO2TEST.BIZ</a></p>  <p><b>FAX ORDERS TO: 859/277-1532</b>  <b>RX'S filled exclusively by:</b>  <b>TRICARE PHARMACY NETWORK</b></p>
Practitioner: <i>Please Print</i>	FAX:	
Veterinary License #:	DATE:	
Practice Name and Address: <i>Please Print</i>	Ship to: Address same as Practice _____	

Address Below:	

Patient:	Shipping Information: <b>In Town:</b> Hold for Pickup at Pharmacy (    ) <b>Out of Town:</b> Ground (    ) Second Day Air (    ) Next Day Air (    )
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**Credit Card Payment Information** **We accept American Express, Visa, Master Card & Discover**

Cardholder:	Card #	Expiration:
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	<u>QUANTITY</u>	<u>PRICE/UNIT</u>	<u>EXTENDED PRICE</u>
<b>SINGLE PRO 2 TEST KIT</b>		<b>\$75.00/</b>	
<b>BOX OF 6 PRO 2 TESTS</b> <i>(Includes shipping container)</i>		<b>\$750.00/</b>	
<b>SHIPPING CONTAINER ONLY</b>		<b>\$28.00</b>	
		<b>SUB TOTAL</b>	
		<b>SHIPPING</b>	
		<b>6% TAX</b>	
		<b>TOTAL</b>	