

BIOGENETIC SERVICES, INC.

47927 213th Street Aurora, South Dakota 57002-6605 Phone: (605)693-8501 Fax: (605)693-8507 e-mail: info@biogeneticservices.com

Home Kit Order Form

Mail Kit to: Please include apartment or suite numbers.						
Name:						
Address:	·			01.1		7: 0 1
City:				State:	Talanhana	Zip Code:
Contact Per Email:	rson:				Telephone: Fax:	
Alternate Te	elenhone:				rax	
Alternate 10	стернопе.				_	
Dueferned B	Mathad of	Mailing: (Calaat	Om a)			
		Mailing: (Select	•			
	•		_		ery days - \$6 additio	nally
	UPS - Ove	ernight - \$25 add	ditionally (fee may vary	based on distance)	
Method of	Pavment:	(Select One)				
	-	We accept: VIS	A. MasterC	ard, or Discove	er	NO PERSONAL CHECKS.
		·				
Type of Car	<u>rd:</u>	VIS	A		MasterCard	Discover
Maria					A (NI l	
Name:						-
Expires:		_Signature:				
Address:				Ctoto		7in Code
City:						Zip Code:
				Fax:	<u> </u>	
Email:				Alternate Phone	e:	
Cost:					<u>Step</u>	
Home Kit				\$25.00	O 1	
Selected Shipping Cost - \$6 or \$25				*	2	
SD applicab	ole sales ta	ax (<mark>SD residence</mark>	only)		3	
					7	
		Final C	ost of Kit:			

PLEASE CALL WITH QUESTIONS! 1-605-693-8501

FO114.1 Home Kit Order Form 01/13 1/17/2013