



**STEP 1 - COMPLETE YOUR INFORMATION BELOW**

<b>Member ID</b> (found on Health ID card):		<b>Date of Birth:</b>	
<b>First Name:</b>		<b>Last Name:</b>	
<b>Address:</b>			<b>Apt. #:</b>
<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>	
<b>Phone:</b>	<b>Email</b> (optional):		

**STEP 2 - PRODUCT SELECTION**

Cash, checks, credit cards or money orders are not accepted under this OTC benefit.

	ITEM #	PRODUCT NAME	QUANTITY	PRICE
1				\$
2				\$
3				\$
4				\$
5				\$
6				\$
7				\$
8				\$
<b>TOTAL ORDER</b>				<b>\$</b>

Mail this completed form to the following address:

Medline  
Attn: OTC Servicing Center  
One Medline Place  
Mundelein, IL, 60060-9806

**STEP 2 - PRODUCT SELECTION** *(continued)*

Cash, checks, credit cards or money orders are not accepted under this OTC benefit.

	ITEM #	PRODUCT NAME	QUANTITY	PRICE
9				\$
10				\$
11				\$
12				\$
13				\$
14				\$
15				\$
16				\$
17				\$
18				\$
19				\$
20				\$
21				\$
22				\$
23				\$
24				\$
25				\$

**TOTAL ORDER** \$

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Mundelein, IL, 60060-9806

If you place your order using an order form, your order total will be applied to the quarter in which we receive your form. For example, if you mail your order form on June 29<sup>th</sup>, but we receive it on July 1<sup>st</sup>, your order total will be applied to your third quarter benefit, not your second quarter benefit.