

SECUREDSCRIPTS.COM

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109 S. Mount Vernon Ave., Uniontown, PA 15401

Tamper-Resistant Prescription Order Form

Toll Free: 1-877-515-5219 Fax: 724-438-6050

CUSTOMER CONTACT INFORMATION	CONTACT NAME:		CUSTOMER SHIPPING ADDRESS
	TELEPHONE NUMBER:		
	FAX NUMBER:		
	E-MAIL ADDRESS:		
	HOW WOULD YOU LIKE TO RECEIVE YOUR PROOF? E-MAIL: <input type="checkbox"/> FAX: <input type="checkbox"/>		

SecuredScript.com a division of KwikTickets.com respects you and your patients' right to privacy. Customer information is never shared or sold to third parties. If you do not wish to receive special product offers and information from us, please check here.

CUSTOMER CREDIT CARD INFORMATION	CREDIT CARD TYPE: <input type="checkbox"/> MASTERCARD <input type="checkbox"/> VISA <input type="checkbox"/> DISCOVER
	CREDIT CARD NUMBER: EXPIRATION DATE: <small>(MM/YY)</small>
	CARDHOLDER'S NAME: <small>(Required Please Print or Type)</small>
	CARDHOLDER'S ADDRESS:
	CARDHOLDER'S SIGNATURE: <small>(Required Please Sign)</small>

PRESCRIPTION PAD ORDER	4 1/4 x 5 1/2 Prescription Pads				5 1/2 x 8 1/2 Prescription Pads			
	<input type="checkbox"/> 1 PLY Rx Pads (100 PRESCRIPTIONS per prescription pad.)				<input type="checkbox"/> 1 PLY Rx Pads (100 PRESCRIPTIONS per prescription pad.)			
	NUMBER OF PADS	PRICE PER PAD	NET PRICE OF PADS	TOTAL NUMBER OF PRESCRIPTIONS	NUMBER OF PADS	PRICE PER PAD	NET PRICE OF PADS	TOTAL NUMBER OF PRESCRIPTIONS
	<input type="checkbox"/> 10			1,000 Prescriptions Total	<input type="checkbox"/> 10			1,000 Prescriptions Total
	<input type="checkbox"/> 25			2,500 Prescriptions Total	<input type="checkbox"/> 25			2,500 Prescriptions Total
	<input type="checkbox"/> 50			5,000 Prescriptions Total	<input type="checkbox"/> 50			5,000 Prescriptions Total
	<input type="checkbox"/> 100			10,000 Prescriptions Total	<input type="checkbox"/> 100			10,000 Prescriptions Total
	<input type="checkbox"/> 2 PLY Rx Pads (50 PRESCRIPTIONS per prescription pad.)				<input type="checkbox"/> 2 PLY Rx Pads (50 PRESCRIPTIONS per prescription pad.)			
	<input type="checkbox"/> 10			500 Prescriptions Total	<input type="checkbox"/> 10			500 Prescriptions Total
	<input type="checkbox"/> 25			1,250 Prescriptions Total	<input type="checkbox"/> 25			1,250 Prescriptions Total
<input type="checkbox"/> 50			2,500 Prescriptions Total	<input type="checkbox"/> 50			2,500 Prescriptions Total	
<input type="checkbox"/> 100			5,000 Prescriptions Total	<input type="checkbox"/> 100			5,000 Prescriptions Total	
STOCK COLOR SELECTION: <input type="checkbox"/> BLUE <input type="checkbox"/> GREEN				STOCK COLOR SELECTION: <input type="checkbox"/> BLUE <input type="checkbox"/> GREEN				
8 1/2 x 11 Prescription Laser Sheets (Blank Unprinted Stock. No Imprinting Available.)								
NUMBER OF SHEETS	PRICE PER SHEET	NET PRICE OF PADS	STOCK COLOR SELECTION	NUMBER OF SHEETS	PRICE PER SHEET	NET PRICE OF PADS	STOCK COLOR SELECTION	
<input type="checkbox"/> 500			BLUE ONLY	<input type="checkbox"/> 2500			BLUE ONLY	
<input type="checkbox"/> 1000			BLUE ONLY	<input type="checkbox"/> 5000			BLUE ONLY	

Standard production time is 7 to 10 business days. Rush Service is available for an additional charge of \$ 45.00 with Proof in 1 day and shipping 3 days from approval. Express Rush Service is available at an additional charge of \$ 85.00 with Proof ready same day and shipping 2 days from approval when approval is received by 2:00 P.M. EST. Large orders do not qualify for Rush and Express Rush Service. Please contact our sales staff for more information.

SecuredScript Imprint Information	Please print or type wording exactly as you wish it to appear. Use a separate sheet if necessary. Include printed samples whenever needed. Limit of 8 total prescribers and locations per prescription pad. We will typeset your pad according to the number of prescribers and locations.							
	Prescriber(s) Information Limit of 8 prescribers per pad. Check boxes are added to prescribers names to clearly identify multiple prescribers							
	Prescriber Name	Alternative Line/Specialty	Degree(s)	License #	License Display Option	DEA #	DEA # Display Option	
					<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only		<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only	
					<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only		<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only	
					<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only		<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only	
					<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only		<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only	
	<input type="checkbox"/> There are more than 4 prescribers on this prescription pad. I have attached an additional page listing the other prescribers.							
	Practice Information Minimum of 1 location per pad. The maximum number of prescribers and locations is 9 per pad.							
	Practice Name	Address	City	State	Zip Code	Telephone	Fax Number	
<input type="checkbox"/> There are more than 2 locations on this prescription pad. I have attached an additional page listing the other locations.								

IMPRINT EXAMPLE	Standard Imprint Layout: Layout for illustration purposes only. Certain states require specific layouts and wording to meet Board of Pharmacy regulations. Your pad will always be adjusted to reflect your state's most current requirements.							
	Top of Prescription Pad Example				Bottom of Prescription Pad Example			
	NO. 0001 Practice Name <input type="checkbox"/> Physician Name, Degree <input type="checkbox"/> Physician Name, Degree Alternative Line / Speciality Alternative Line / Speciality Address, City, State, Zip Code Telephone Number Fax Number				<input type="checkbox"/> Label <input type="checkbox"/> No Substitution LIC.#: License Number Signature: _____ DEA #: DEA Number _____ M.D. REPEAT 1 2 3 4 5 PRN NR <small>BATCH 43877</small>			

Please use this page for additional prescribers, locations, and comments.

SecuredScript Imprint Information (Additional Prescribers and Locations)

Please print or type wording exactly as you wish it to appear. Use a separate sheet if necessary. Include printed samples whenever needed. Limit of 8 total prescribers and locations per prescription pad. We will typeset your pad according to the number of prescribers and locations.

Additional Prescriber(s) Information

Prescriber Name	Alternative Line/Speciality	Degree(s)	License #	License Display Option	DEA #	DEA # Display Option
				<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only		<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only
				<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only		<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only
				<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only		<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only
				<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only		<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only
				<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only		<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only
				<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only		<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only
				<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only		<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only
				<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only		<input type="checkbox"/> Do Not Print <input type="checkbox"/> Blank Line Only

Additional Practice Information

Practice Name	Address	City	State	Zip Code	Telephone	Fax Number

Additional Comments, Information, or Requests

Please use the space below to add any additional comments, information or requests. You may also call our sales staff for additional information on larger quantities and other products that we carry. Thank you for choosing SecuredScripts.com, a division of KwikTickets.com.