toll-free 1.877.592.9192
toll-free fax 1.877.737.3517

For pharmacy use only - tracking number
PDP5

Prescription Product Order Form

Please complete and fax this form toll-free 1.877.737.3517

DiscountRxMart
LOW COST CANADIAN MEDICAL SOLUTIONS

Dispensed by Manitoba Pharmaceutical Association (MPhA) Member, Nexus Licence # 32533
/ 1515 One Lombard Place
/ Winnipeg / Canada / R3B 0X3
/ Phone (toll-free) 1.877.592.9192
/ Fax (toll-free) 1.877.737.3517
/ email: info@discountrxmart.com
/ web: www.discountrxmart.com

First Name >PDP5
Last Name
Address
City/Town
State
Zip Code
Country
Phone (home)
Phone (work)
Email
Payment Type ☐ Visa ☐ Mastercard ☐ Other (see below)*
Name on Card
Card Number
Expiry Date

Shipping Information: Same as above? ☐ Yes ☐ No If no
Name
Address
City/Town State
Zip Code Country
Phone
Email

Please do not forget these important questions:

1. Is this a Refill?
☐ Y ☐ N
If yes, Refill number: _____

2. Have you previously filled out a Patient Questionnaire form?
☐ Y ☐ N
If no, please fill out and submit Patient Questionnaire form with your order.

3. Do you want your order shipped with another family member's at your same address?
☐ Y ☐ N
If yes, name: _____

4. Do you understand and agree that we will use generics to fill orders and save you money unless prescription specifies brand only?
☐ Y ☐ N

	Drug Name	Strength	Quantity	Price	
				Sub Total	
				Shipping	$15.00
				Total	

**We accept "International" money orders available at any U.S. Post Office or bank. Attach money order to your Prescription Product Order form. If this form of payment is chosen, all forms must be mailed, not faxed. Please allow an additional 7 days processing due to mail time.*

Don't forget to:
❒ Attach the original prescription or Fax a copy of your prescription or have your doctor call
❒ Attach a void check if choosing electronic check payment option