

To place your order:

- **Online:** at www.dialyvite.net We accept American Express, Visa, MasterCard or Discover.
- **Call Toll Free: 866-358-9773 or Fax to 715-358-9778**
- **Mail:** form with **Check or Money Order:**

Payable to **HILLESTAD PHARMACEUTICALS USA, INC**
 178 US HWY 51 NORTH, WOODRUFF WI 54568-9501

Credit Card #: _____
 Expiration Date: _____ CVV _____
 Signature: _____

		QTY	TOTAL
HP20 Dialyvite® 800	\$ 10.45/100 Tablets		
HP50 Dialyvite® 800+Zinc	\$ 11.60/100 Tablets		
HP60 Dialyvite® 800+Iron	\$ 11.55/100 Tablets		
HP15 Dialyvite® 800+Zinc 15	\$ 11.00/100 Tablets		
HP25 Dialyvite® 800/ Ultra D	\$ 15.95/90 Tablets		
HP30 Dialyvite® 800 Plus D Chewable	\$ 14.95/90 Wafers		
HP32 Dialyvite® 800 Chewable	\$ 12.95/90 Wafers		
HP35 Ferrimin 150	\$ 14.00/120 Tablets		
HP95 Biotin 5 mg	\$ 12.55/120 Tablets		
HP45 Calcium Acetate	\$ 18.15/200 Tablets		
HP45V Calcium Acetate	\$ 39.95/500 Tablets		
HP90 Vitamin D 5000	\$ 10.95/90 Vegicaps		
HP100 Vitamin D3 Max	\$ 12.95/12 Tablets		
HP105 Vitamin D3 Chewable	\$ 9.95/90 Tablets		
HP120 Omega-3 Concentrate	\$ 9.95/60 Gelcaps		
HP121 Omega-3 Concentrate	\$ 14.95/120 Gelcaps		
HP130 Whey Plus Protein	\$ 14.95/266-gram Canister		
HP131 Whey Plus Protein – in single serving (13.3 gram) pouches	\$ 16.75 12/Pouches		
HP135 Hi-Peak Instant Soy Protein Mix	\$ 13.95/260 grams		
HP136 Hi-Peak Instant Soy Protein Mix – in single serving (20 gram) pouches	\$ 15.75 12/Pouches		
HP140 Leg & Ankle Lotion	\$ 13.95/8 fl.oz.		
HP145 Peak Protein/Fiber Tablets	\$ 11.75/180 Tablets		
HP155 Dialyvite® Enzyme Complex Chewable	\$ 8.75/90 Chewable Tablets		
HP160 Dialyvite® Probiotic	\$ 8.75/30 Vegicaps		
HP161 Dialyvite® Probiotic	\$ 28.75/120 Vegicaps		
HP165 Dialyvite® Chewable Probiotic	\$ 14.95/60 Chewable Tablets		
HP170 Vitamin B12 Plus Chewable	\$ 10.95/60 Tablets		
HP618 Foot Care Cream	\$ 8.75/ 4 oz. Jar		
HP200 Dialyvite® Daily-Betic	\$15.95/ 90 Tablets		

Shipping \$4.00 per order (4 bottles or more Free Shipping)

Name: _____
Mailing Address: _____
City: _____ **State:** _____ **Zip** _____
Phone Number: _____
REQUIRED

Subtotal	
Shipping & Handling	
WI Resident 5½% Sales Tax	
Total	