PomGT

321 Newark Street, Suite 500
Hoboken, New Jersey 07030
[t] 877-766-2010
[f] 201-633-5739
info@pomgt.com
www.pomgt.com

store: _____ date: _____

ordered by: _____ phone: _____

email: _____ fax: _____

shipping address: _____

billing address: (if different) _____ resale certificate #: _____

minimums

Orders: $199, unless special offer states otherwise
Cases contain 24 bottles of PomGT

terms

All orders must be pre-paid by American Express, MasterCard, Visa, Discover or pre-printed company check. Orders paid by check will be shipped *after check clears*. Accounts in good standing will be reviewed after six months for Net-30 terms. All buyers must submit a valid resale certificate.
All orders are final and cannot be cancelled.

shipping

All orders are shipped UPS Ground. Please allow three to five weeks for shipment. In some cases, rush delivery service is available for an additional charge. Buyer must notify Bullwater Health & Fitness, LLC of any shortages or damages within five (5) days.

method of payment

pay by check [ ]

Please enclose a pre-printed company check with your order. The order will not be shipped until check clears. Returned checks are subject to a $50 fee.

pay by credit card

amex discover mastercard visa

card number:

cid:

expiration date:

[ ] I authorize Bullwater Health & Fitness, LLC to charge ONLY this order to this credit card.

[ ] I authorize Bullwater Health & Fitness, LLC to keep this credit card on file and charge all future orders until further notice.

quantity	description	subtotal	total
		order subtotal *does not include shipping*	

new dealer special

First time orders from qualified retailers are eligible for our new dealer special. This includes a case of PomGT and display materials for your store for the discounted price of $199.

wholesale pricing

Cases of 24 bottles of PomGT are $219 each.
Volume discounts are available

contact us

For questions about your order or to place additional orders, please call 877-766-2010 or fax this order form to 201-633-5739.

X _____ **date:** _____

Signature indicates authorization to place order and confirms above payment selection.