

Step 1: Provide all your information below

OTC Benefit Card #	Date of Birth (MM/DD/YYYY)	
Member ID		
First Name	Last Name	
Street #	Street Name	Apt/Suite #
City	State	Zip Code
Phone	Email	

Step 2: Pick your products

Item#	Product Description	Quantity	Price
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Step 3: Place your order

Mail to: 1910 Innovation Way, Libertyville, IL 60048

If you place your order by mail 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, but we received it on July 1, your order total will be applied to the benefit period in which we receive it.