



2022 Over-The-Counter (OTC) Product Catalog Order Form

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
1 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	_____	\$ _____
2 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	_____	\$ _____
3 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	_____	\$ _____
4 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	_____	\$ _____
5 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	_____	\$ _____
6 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	_____	\$ _____
7 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	_____	\$ _____
8 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	_____	\$ _____
9 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	_____	\$ _____
10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	_____	\$ _____

Total Order: \$ _____

STEP 3 Place your order

OTC Servicing Center, 1200 Townline Rd, Mundelein, IL, 60060

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