

# Folbee Plus<sup>®</sup> Tablets

## Trade Package Request Form

To receive your no charge Trade Package of Folbee Plus<sup>®</sup> Tablets, please take a moment to complete this form and fax it, along with a copy of your DEA Registration and/or State License to 1-866-DrBPIRx (1-866-372-7479).

Please note: In compliance with the Prescription Drug Marketing Act regulations, incomplete request forms cannot be processed and samples will not be forwarded.



*Please Print Neatly In Ink. All information MUST be provided.*

|   |                       |                          |       |          |
|---|-----------------------|--------------------------|-------|----------|
| Ship To (Practitioner's Name)   |                       |                          |       |          |
| Street Address  |                       |                          |       |          |
| City  |                       | State                    |       | Zip Code |
| Phone No.<br>(        )   | Fax No.<br>(        ) | Professional Designation |       |          |
| Practitioner's DEA Number   |                       | MD                       | DO    | NP       |
| DEA EXPIRATION DATE   |                       | PA                       | OTHER |          |
| State License Number  |                       |                          |       |          |
| EXPIRATION DATE   |                       |                          |       |          |
| My signature certifies that I am a licensed practitioner eligible to receive these samples. They are being requested for the medical needs of my patients and are not intended for sale, resale, trade, barter or credit return. Please send the sample product(s) listed below for use in my practice:<br><i>Practitioner's original ink-written signature required.</i> |                       |                          |       |          |
| <b>X</b>  |                       |                          |       | Date     |

## Folbee Plus<sup>®</sup> Tablets Sample Information:

| Breckenridge Sample Product      | Sample NDC # | Sample Size | Ship Qty. |
|----------------------------------|--------------|-------------|-----------|
| Folbee Plus <sup>®</sup> Tablets | 51991-082-90 | 90          |           |

All sample requests for this product shall be pursuant to individual state regulations.



|                                |                 |
|--------------------------------|-----------------|
| <b>– For Office Use Only –</b> |                 |
| Breckenridge Order #           | Date Order Sent |

**800-367-3395**  
folbeplus.com