**Herbal Formulation Request Form**

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| **Request Date** |  | **Fulfilled Date Office use** |  |
| **Practitioner** |  |  **Phone**  |  |
| **Client** |  |  **Phone** |  |
| **Address** |  |
| **Credit Card** |  | **Exp** | **Code** | **Billing Zip** |
| **E-mail** |  |

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| **Dosage Instructions** |
| **Formula 1**\_\_\_ tsp/caps \_\_\_ x daily \_\_\_days\_\_\_before meals\_\_\_between meals\_\_\_with meals\_\_\_after mealsWith \_\_\_\_\_\_water, ghee, milk, aloeOther:**Formula 2** \_\_\_ tsp/caps \_\_\_ x daily \_\_\_days\_\_\_before meals\_\_\_between meals\_\_\_with meals\_\_\_after mealsWith \_\_\_\_\_\_water, ghee, milk, aloeOther: |

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| **Herbal Formula #1** | **Parts** | **Teaspoons** |
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| **Herbal Formula #2** |  |  |
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**Herbal Formulation Request**

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| **Request Date** |  | **Fulfilled Date Office use** |  |
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| **Address** |  |
| **Credit Card** |  | **Exp** | **Code** | **Billing Zip** |
| **E-mail** |  |

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| **Dosage Instructions** |
| **Formula 3**\_\_\_ tsp/caps \_\_\_ x daily \_\_\_days\_\_\_before meals\_\_\_between meals\_\_\_with meals\_\_\_after mealsWith \_\_\_\_\_\_water, ghee, milk, aloeOther:**Formula 4** \_\_\_ tsp/caps \_\_\_ x daily \_\_\_days\_\_\_before meals\_\_\_between meals\_\_\_with meals\_\_\_after mealsWith \_\_\_\_\_\_water, ghee, milk, aloeOther: |

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| **Herbal Formula #3** | **Parts** | **Teaspoons** |
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| **Herbal Formula #4** |  |  |
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