



Automatic Refill



1201 North 800 East • Orem, UT 84097

If you fax this form, please do not mail the original.

Customer Service Center • 1-800-UNICITY
Fax • 1-800-226-6232

General Information

| | | | | | |
|------------------------------------------------------------|--|-----------|-----------------------------------|--|--|
| Distributor or Customer Name (Last, First, Middle Initial) | | | Distributor or Customer ID Number | | |
| Shipping Address | | Area Code | Daytime Phone | | |
| City | | State | Zip Code | | |
| E-Mail Address | | | | | |

If you are a customer, please enter referring Distributor's name (Last, First, Middle Initial)

Check Applicable Box: NEW Auto-Refill MODIFY Auto-Refill STOP Auto-Refill **Preferred Monthly Ship Date:** (1-20)

Automatic Refill Order Information

| Item No. | Product Description | Quantity | PV (FO Use) | Unit Price | Total PV (FO Use) | Extended Price |
|----------|------------------------------|----------|----------------|------------|----------------------|----------------|
| 23865 | Bios Life Slim™ (60 packets) | | 52 | | | |
| | | | | | | |
| | | | | | | |

(Attach separate sheet for additional products.)

Shipping & Handling (Additional shipping may apply.)

| | | | | |
|-----------------------|--------------------------------|--|--------------------------------|----------|
| <u>Order Subtotal</u> | <u>Shipping & Handling</u> | | Subtotal | \$ _____ |
| Up to \$100.99 | \$4.00 | | + Shipping & Handling | \$ _____ |
| \$101.00-\$249.99 | 4.0% | | + Sales Tax (where applicable) | \$ _____ |
| \$250.00-\$499.99 | 3.5% | | | |
| \$500.00-\$999.99 | 2.5% | | Total Amount | \$ _____ |
| \$1,000+ | FREE | | | |

Payment Information

Visa® MC Discover® AmEx

| | |
|--------------------|-------------------------|
| Credit Card Number | Expiration Date (MM/YY) |
| Cardholder's Name | |

My signature below indicates that I am the cardholder and have thoroughly read and accepted all of the terms and conditions set forth in this agreement. I understand and agree that Unicity will automatically ship the order and charge me as I have indicated until the company has received written notification from me to cancel my automatic order. I authorize Unicity to use the above method of payment in processing my order monthly.

Signature _____ Date (MM/DD/YY) _____

Automatic Refill Agreement Terms and Conditions

As a participant in the Unicity Automatic Refill program, I authorize Unicity to ship my order to me monthly after processing the payment method that I have indicated. Unicity is authorized to bill my credit card company or withdraw from my bank account as indicated herein, each month of this agreement. Unicity is under no obligation to ship any products until full payment has been received. Shipment will take place approximately two days from payment confirmation. Any new Automatic Refill Agreement received will cause an order to be shipped within two days of receipt of said agreement. Each month thereafter, my Automatic Refill order will be sent. Each Automatic Refill order will be received within three to five days after the date of shipment. Shipping and handling charges will be applied to each Automatic Refill order.

- AUTOMATIC REFILL:** This program allows me to automatically receive my product order each month and guarantees that, as a Distributor in good standing, I will meet the PV qualification requirement to be eligible for awards under the Compensation Plan in that month, if my Automatic Refill order is for at least the minimum Qualifying amount required by the Compensation Plan.
- REVISION:** I may revise my Automatic Refill Agreement by submitting a new Automatic Refill Agreement and checking the box labeled "Modify Auto-Refill" above on this form. The Customer Service Center must receive revisions no later than 10 calendar days prior to my next Automatic Refill shipment date. If the revision is received less than 10 calendar days prior to shipment, there will be no guarantee that the revision will be effective for that shipment. No exchanges may be made for previous orders that were shipped. The revised agreement will be in effect for the next shipment date.
- CANCELLATION:** I may cancel my Automatic Refill Agreement by submitting a new Automatic Refill Agreement and checking the box labeled "Stop Auto-Refill" above on this form. The Customer Service Center must receive the cancellation notice no later than 10 business days prior to my next Automatic Refill shipment date. If the cancellation is received less than 10 business days prior to shipment, there will be no guarantee that the last order will not ship. I will not be allowed to return any Automatic Refill orders to Unicity if I remain a Distributor, unless I can provide evidence to show that the cancellation had been received more than 10 business days before the order was shipped, such as a fax transmittal sheet.