

Name: _____

Date: _____

Medical Weight Loss Menu

Please fill out and return your completed order form right away, so that we may have your order ready for you when you check out

FOOD

Powder Shakes (12 per box)

(16g Protein)
Chocolate _____
Vanilla _____
Strawberry _____

Ready To Drink (6 per box)

(15g Protein)
Chocolate _____
Vanilla _____
Field Berry _____

TOTAL SHAKES: # _____

Soups (7 per box)

(15g Protein)
Cream of Chicken _____
Cream of Tomato _____

TOTAL SOUPS: # _____

Bars (7 per box)

(15g Protein)
Choc. Graham Crunch _____
Cinnamon Crunch _____
Mixed Berry Crunch _____
Fudge Almond Coconut _____
Caramel Peanut Chew _____

(10g Protein)

Choc. PB Crunch _____
Buttery Pecan Chew _____
Choc. Brownie Bar _____
Cookies & Cream _____
Totally Toffee _____
Choc. Mint _____

TOTAL BARS: # _____

TOTAL FOOD ITEMS: # _____

PRE-PAID OR @

OTHER

Soluble Fiber Drink Mix

Lemon Iced-Tea \$12 _____
Mixed Fruit Punch \$12 _____

Supplements

Multi-Vitamins \$10 _____
Vitamin D Drops \$20 _____
Magnesium \$10 _____

Books

Protein Power \$15 _____
Mindless Eating \$15 _____
Mindful Eating \$15 _____
The Instinct Diet \$25 _____

Calorie King
(Calorie Counter) \$10 _____

TOTAL OTHER: \$ _____

FOOD TOTAL: \$ _____

FOOD & OTHER \$ _____