



Refill Order Form

P.O. Box 1244 • Winter Park, FL 32790-1244
Toll free: 866-699-8239 • Toll free fax 407-671-7960

www.Xubex.com

****This form may not be used to order refills for controlled substances. ****

PATIENT INFORMATION

First:	Last:	M.I.:	
Date of Birth:	SSN:	<input type="checkbox"/> Male <input type="checkbox"/> Female	
Best Phone:	Alt. Phone:		
Address:	City:	State:	Zip:
Email:			
Shipping Address:			
<input type="checkbox"/> Same as Above			

METHOD OF PAYMENT

****Please include price of your medication(s) plus the cost for the selected shipping option in your payment.****

Payment Type: Check Money Order Credit/Debit Card AMEX VISA MASTERCARD DISCOVER

Cardholder Name:			
Cardholder Address:			<input type="checkbox"/> Same as above
City:	State:	Zip:	
Card Number:	Expiration Date: ____/____	CVV Code:	
\$ Amt. To Be Charged:	Charge Me For A: <input type="checkbox"/> 30 Day Supply <input type="checkbox"/> 60 Day Supply <input type="checkbox"/> 90 Day Supply <input type="checkbox"/> ____ Day Supply		

PRESCRIPTION

Prescription numbers begin with a "6" or "4" and can be found on top of your medication bottle or packaging.

DRUG NAME	STRENGTH	Rx NUMBER

PATIENT SIGNATURE:	DATE:
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FOR OFFICE USE ONLY:

Patient Code:	Date Received:	By:
<input type="checkbox"/> No Prescription Attached <input type="checkbox"/> No Payment <input type="checkbox"/> Incomplete Application <input type="checkbox"/> Contact Physician <input type="checkbox"/> Bill Ins. <input type="checkbox"/> Transfer		

Frequently Asked Questions:

How do I order my refills?

Refills can be ordered via following methods:

1. **Mail-** You may mail the completed Refill Request Form to *P.O. Box 1244, Winter Park, FL 32790-1244*. Please be sure to include your payment information/form. Accepted forms of payment are credit or debit card, check, or money order.
2. **Phone-** If paying by credit card, you may call our Customer Care line at **866-699-8239** and a Patient Care Specialist will gladly assist you complete your refill order.
3. **Online-** You may create your personal account at www.Xubex.com where you can order your refills quickly and securely.

When should I order my refills?

Refill orders should be made approximately 2 weeks prior to running out of medication. For controlled substances, we will not refill your medication earlier than allowed by law.

I have no refills left on my prescription. What should I do?

Please contact your physician to provide you with a new prescription. New orders can be faxed or phoned into our pharmacy from your physician's office. You can also mail in new prescriptions to *P.O. Box 1244, Winter Park, FL 32790-1244*. Please be sure to include your payment information/form with your new prescription. Accepted forms of payment are credit or debit card, check, or money order.

Do I need a new application each time I re-order?

No, please do not re-send the registration form with your refill request. Your registration with Xubex is valid for the life of your participation in our program.

How do I change my shipping address?

Please complete the address section of the Refill Order Form. You may also call our Customer Care line at **866-699-8239** and a Patient Care Specialist will gladly assist you change your shipping address. Lastly, you may also manage your shipping address online by creating your personal account at www.Xubex.com.

Can I use this form to order refills for controlled medications?

No. You must call our Customer Care line at **866-699-8239** in order to refill prescriptions for controlled substances.