

**20 times more powerful than Vitamin C**

**50 times more powerful than Vitamin E**

**If there was one thing you could change about your health, what would it be?** \_\_\_\_\_

	You	Family	Friend		You	Family	Friend
Crohn's	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Asthma/Bronchitis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Constipation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Respiratory Inflammation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ulcers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Frequent Infection/Flu/Colds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gout	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	High Histamine Levels/ Sinus Problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Parkinson's	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
High Insulin Needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vertigo (Dizziness)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetic Retinopathy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Headache Pain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Macular Degeneration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Alzheimer's	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cataracts/Glaucoma	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Carpal Tunnel Pain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vascular Disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ALS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weak Arteries and Veins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ADD/ADHD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good Cellular Collagen/Elasticity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fibromyalgia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poor Lower Leg Blood Volume	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poor Circulation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Low Energy & Stamina	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
High Blood Pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Chronic Fatigue	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poor Capillaries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lupus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fat Formation/Cellulite	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Immune Deficiency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Varicose Veins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hepatitis C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Phlebitis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	High Cholesterol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rough Skin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hemorrhoids/Prostate Problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bruising/Cracking Skin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Menopause/PMS/Cramps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eczema	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Aging concerns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Psoriasis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cancer Risk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Damaged Artery Lining	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Environmental Concerns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Joint Flexibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wrinkling of the Skin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arthritis Inflammation/Pain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pollution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sports Injuries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Smoke	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Muscle Cramps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spasms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Allergies/Hay Fever	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All Free Radical Damage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Allergic Reactions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone (day) \_\_\_\_\_

Phone (eve) \_\_\_\_\_

E-mail \_\_\_\_\_

**Do you take vitamins?**  YES  NO

**Are you familiar with ANTIOXIDANTS and what they do?**  YES  NO

**Do you know about FREE RADICALS and where they come from?**  YES  NO

**Do you know that over 60 human diseases can be associated with FREE RADICALS and their effects on our bodies?**  YES  NO

**Is there any reason you would not be willing to use a product that would address these concerns?**  YES  NO

**To save this form on your computer and return your answers by email, click here →**