



# Union Center Pharmacy

2324 Eastlake Ave. E, Suite 405 • Seattle, WA 98102-6536  
www.unioncenterpharmacy.com  
telephone: (206) 441-9174 • fax: (206) 448-4406



## MAIL ORDER PRESCRIPTION ORDER FORM

1. COMPLETE A SEPARATE FORM FOR EACH PATIENT FOR WHOM YOU ARE ORDERING.
2. FOR NEW PRESCRIPTIONS, COMPLETE ALL INFORMATION EXCEPT THE RX NUMBER SECTION.
3. ENCLOSE WRITTEN PRESCRIPTION(S) AND THIS FORM IN AN ENVELOPE AND MAIL DIRECTLY TO:

**UNION CENTER PHARMACY  
2324 EASTLAKE AVE. E., SUITE 405  
SEATTLE, WA 98102**

4. FOR TRANSFER PRESCRIPTIONS FROM OTHER PHARMACIES, PLEASE FILL OUT THE TRANSFER PHARMACY NAME AND PHONE NUMBER SO WE CAN CONTACT THEM FOR YOUR PRESCRIPTION INFORMATION.
5. FOR REFILL PRESCRIPTIONS, COMPLETE ALL INFORMATION. REFILLS MAY ALSO BE ORDERED:

**ONLINE AT [WWW.UNIONCENTERPHARMACY.COM](http://WWW.UNIONCENTERPHARMACY.COM)  
VIA PHONE **206-441-9174** OR **800-441-9174**  
VIA FAX **206-448-4406**.**

6. IF YOU HAVE QUESTIONS REGARDING HOW YOUR DRUGS ARE GOING TO BE PRICED, PLEASE CALL US HERE AT UNION CENTER PHARMACY.
7. DUE TO THE POTENTIAL NEED TO REQUEST REFILL AUTHORIZATION, OR FORMULARY CHANGES, PLEASE ALLOW 10 – 14 DAYS FOR DELIVERY.