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INDEPENDENT MARKETING ASSOCIATE SALES VOLUME TRANSACTION REPORT FORM #1008A

This form must be completed and received by Omnitrition International, Inc. (hereinafter referred to as "Omnitrition") in the following manner:

This form must be received no later than the fifth day of the month following the downline transaction, and attached to Form 1008 (Supervisor Application).

These forms can be mailed, expressed or faxed to Omnitrition. However, it is the IMA's sole responsibility to ensure that Omnitrition receives these forms in a timely manner.

Check all which are applicable for Purchasing IMA:

- Advancing on Discount Sliding Scale**
- Qualifying for Supervisor status:**
 - Using one (1) month**
 - Using two (2) consecutive months**

Credit Sales Volume to the month of _____20____

Selling IMA Information (Sponsor)

SS# OR Fed. ID. # _____
Name _____
Telephone _____

Purchasing IMA Information (Qualifying IMA)

SS# OR Fed. ID. # _____
Name _____
Telephone _____

Order Number*	Date of Order	Transaction Date	Retail Amount
TOTAL			

Summary of Rules for Using This Form*:
(This Information is a summary only)

1. Purchasing IMA must be in the Personal Group of the Selling IMA.
2. This form should only be submitted if Sales Volume is being used to qualify for Supervisor or advance on the Accumulating Discount Sliding Scale.

Remember: Commission, Overrides and Bonuses are paid based on the original purchase from Omnitrition.

*Order number can be found on packing slip.

***Review the Omnitrition Sales and Marketing Plan (Downline Sales Section) and Rules F-5 and F-22 for proper use of this form.**

We hereby certify that everything contained in this report is true and correct.

 Purchasing IMA Signature

 Today's Date

 Selling IMA Signature

 Today's Date