Receipt Confirmation and Bank Information

We thank you for selecting our product and hope that it will bring you continued pleasure and satisfaction. We also appreciate this great opportunity to have you as our valued partner in expanding our business in Europe.
We are hoping you will enjoy good health and prosperity for many years to come.

Bank details for your commission

Account holder _____

Is the account holder different from the Distributor ID holder? ☐ Yes ☐ No

* Please note that the account holder and distributor name must be identical.
(Exception : account of spouse)

Phone _____ E-Mail _____

Name of the bank _____

IBAN | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

BIC/SWIFT | | | | | | | | | | |

Please return this form by Fax / E-Mail with your signature as soon as you receive your order.

Fax +49-(0)211-936570-27

E-mail: commission@enagiceu.com

_____ _____
Name Your Enagic ID number

_____ ____/____/____
Signature Distributor Date

_____ ____/____/____
Signature Account holder (if different) Date