

Date: ____/____/____

Cancellation of Good Samaritan (Tokurei) Status

I, _____ request the cancellation of my Good Samaritan (Tokurei) Account to become full status distributor of Enagic Singapore.

Distributor ID Number: _____

<u>Payment Calculation</u>	<u>Payment Method</u>		<u>Payment</u>
Machine: _____	<input type="checkbox"/> Cash <input type="checkbox"/> Credit <input type="checkbox"/> Cheque <input type="checkbox"/> Credit <input type="checkbox"/> PayPal <input type="checkbox"/> Bank Transfer	Name: _____	Full <input type="checkbox"/>
Total Price: _____		Credit Card Number: _____	E-Payment <input type="checkbox"/>
Sales Credit: _____		Type of Card: _____ Visa / Master / JCB	

E-Payment

Term: <input type="checkbox"/> 3 Month <input type="checkbox"/> 6 Month <input type="checkbox"/> 10 Month <input type="checkbox"/> 16 Month <input type="checkbox"/> 20 Month
Payment Breakdown: _____ + _____ + _____ + _____ = _____ (Handling) (GST) (Shipping) (Down Payment) (Total Initial Payment)
Monthly payment Amount: _____
Credit Balance After Down Payment: _____

*Please attach Genealogy Report together with this form.

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