

## Change Name /Cancellation of Purchase Form/Regional Change

DEBODE CVI IV.			, <b>9</b>		
BEFORE CHANGE			Apply Date:	/	/
Distributor ID:					
Name:	_				
AFTER CHANGE					
Name:					
REASON FOR CHANGE:					
RELIGIT OR GIRLINGE.					
Terms & Conditions:					
* Applicant must submit the	his form together with the	new signed application	ı form		
* After Cancellation of pur			iod of		
	again Enagic Distributors				
* New Applicant must pro		rocessing and complete	attachment		
* Offset payment not applie	cable				
Processing Fee per category:  Php 2,000 * Normal transfer of account to other customer/distributor					
PHP 2,000	* Regional Change				
	* Consignment Liquidation				
Php 1,000	* BIR/OR Compliance Issue				
* Deceased distributor but transfer to family member for the purpose					
	of claiming the commission	ns			
hp 500 * Transfer distributorship to family member					
No Fee	* Updating of Distibutor's Na				
	* Deceased distributor but transfer to family member for Enagic to				
	collect the outstanding bala	ance			
I acknowledge that I have read agree the terms set forth in this		or Agreement Termination a	and		
I declare that the above inform	ation is my personal informati	on and they are true correc	•+		
and updated. I authorize and co		-			
relation to this application.					
I hereby understand that Enagi	c Philippines. Inc respects and	is committed to the Protec	tion		
of Personal Information or Data					
Company's Data Protection/ Pr	, ,,	• •	ī		
Facebook Page, https://www.fa	acebook.com/official.enagicph	ilippines/ and bulletin boar	d.		
OLD Applicant Printed name a	nd Signature:				
OLD Tippinculit I Tillicu nume u.	na dignature.				
NEW Applicant Printer name a	nd signature:				
For Approval:					
Marketing Department		Commission Depa	rtment		
		ZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZ			
Compliance Department		Accounting Depar	rtment		
- •		- •			
	Collection De	epartment			