Control	No.	



## Enagic Philippines, Inc.

16F A.T. Yuchengco Centre, 26th and 25th Streets BGC, Taguig City

Tel: (632)8519-5508 Fax: (632)8808-3885

## **Commission Offset Agreement**

I,	with Distributor ID:/			
	/ Mobile No: ( )			
and Email Address:				
authorize ENAGIC PHILIPPINES INC. to	•			
PESOS:				
(PHP) from my fu	ture commission rec	eivables. for the	e following reasons:	
Settlement of my machine(s) Settlement of my downline(s)* Other (Please specify):	Settlement of consigned machine(s) Purchase of E8PA card			
For payment settlements of my downline seven (7) days from the date of the Connames and ID numbers of my downline Philippines, Inc. to apply to whom the	nmission Offset Agrees within the said du	eement. If I am r	not able to provide the	
I declare that the above information is I authorized and consent Enagic Philip I hereby understand that Enagic Phili Information or Data Privacy Act of Protection/Privacy Policy posted <a href="https://www.facebook.com/official.eng/">https://www.facebook.com/official.eng/</a>	pines, Inc. to collect ppines, Inc. respects 2012 (RA 10173) on Enagic F	information in a s and is commit and agree to Philippines, In	a relation to this application.  The tends of the Protection of Personal  The terms of the Company's Data  The control of the Company's Data  The control of the Company's Page  The control of the Company's Page	
Signature over Distributor's Printed Name		Date		
PARTICULARS:	D:1		D	
* Distributor's Name	Distributor's ID	Amount	Description	
	TOTAL			
COMMISSION DETAILS: *For Office	Use Only*			
* Distributor's Name	Distributor's ID	Amount	Description	
*please see attached commission				
details*				
Received by:				
Commission Dept.:			Date:	
E-Payment Dept.:		Date:		
Accounting Dept.:		Date:		