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 Kangen Benefits Europe LTD

Phone _____ E-Mail _____

Name of the bank _____

IBAN | | | | | | | | | | | | | S | | | | | | | | | | | | | | |

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

∗ Please return this form by FAX with your signature as soon as you receive your order.

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

_____ _____
Your Name Distributor ID number:

_____ ____/____/____
Your Signature Date