

Name:

## Credit card payment form

Enagic International Co., LTD Maejima 3-25-1 2F Naha-shi Okinawa 900-0016 Japan

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Please Print Clearly	Please	Print	Clearl	y
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Please Print	Clear	ly							
Name									
Address									
City				State			Zip		
Tel (home)	(	)	-		Fax	( )		-	
Cell Phone	(	)	-			1			
E-mail									
Product (please circle)		Ukon	A Set	Ţ	Jkon B	Set	Ul	con C Set	
Cuadit Cand	Data:1	-							
Credit Card Print Name:		.S							
Master/ Visa	a								
Security Co	de (Lo	ocated on	the back of	of the Cre		ast 3 digi	ts of accou	nt number panel)	
							Expire I	Date / /	
Amount JP	<i>I</i>			Signa	ature —				
Please fill up if the delivery Address is different as above									
Name									
Address									
City				State			Zip		
Tel (home)	(	)	-	•	Cell phone	( )		-	
Purchaser's	Name	and ID#	if differen	t from Cr	redit card l	nolder			

ID#