



ForLife Research Singapore Pte Ltd
 10 Eunos Road 8, #12-10,
 Singapore Post Centre,
 Singapore 408600
 singapore.4life.com

PRODUCT ORDER FORM

(65) 6735-2988 - Distributor Services & Product Order Line
 (65) 6733-7688 - Corporate Fax
 E-mail - singaporecs@4life.com
 Business hours - Mon-Fri: 12 noon to 9:30pm, Sat: 10:00am to 5:00pm
 Sundays and Public Holidays: Closed

ORDER INFORMATION

Date _____ / _____ / _____

Distributor or Company Name _____ Distributor ID # _____

Customer's Name _____

Shipping Address (if your shipping address is different from your registered 4Life address) _____

Postcode _____

Telephone Number _____

PRODUCT ORDER INFORMATION

Item Number	Product Name	Qty	LP	Wholesale	Suggested Retail	Total
					SUBTOTAL	
					SHIPPING	
					ORDER TOTAL	

Please choose either ONE of the following:

I will pick up my products from the 4Life Office Please ship the products to me as per the above address

Shipping & Handling Charges: For delivery within 3 working days: shipping charges will be equal to S\$5.35 (Incl. GST) for orders up to S\$321 (Incl. GST). Orders over S\$321 (Incl. GST) will have free shipping. These charges apply to shipping within Singapore only.

Distributor certifies when placing this order that they have sold at least seventy percent (70%) of all products previously purchased.

I understand that products not picked-up within 14 days of the above mentioned date will be shipped out to my address as stated in your records and will be charged accordingly.

Signature _____ Date _____

All orders paid via credit card must be accompanied by a photocopy of the card (front and back) for our verification. 4Life reserves the right to contact the cardholder for authorization of his/her card usage before processing the order if the cardholder is not the party placing the order.

PAYMENT INFORMATION (Payment applies to all products and services selected above)

Cash Nets MasterCard Visa

Credit Card # _____ 3-Digit Security Number _____ Expiration Date _____ Name on Card and Signature (exactly as it appears on card) _____

I hereby authorize ForLife Research Singapore Pte Ltd to charge my credit card for all shipping and handling charges if the products are not picked up within 14 days of this order date.

Details of Credit Card Holder

Name & Address:-

4Life ID No (if any) : _____

Home/Office Tel : _____

Mobile Number : _____

Date: _____

The General Manager
ForLife Research Singapore Pte Ltd
10 Eunos Road 8, #12-10,
Singapore Post Centre,
Singapore 408600

Dear Sir/Madam

AUTHORIZATION LETTER TO CHARGE CREDIT CARD

With reference to the above subject, I hereby authorize ForLife Research Singapore Pte Ltd to charge my credit card

Visa/MasterCard No: _____ Expiry: _____

(CVV No: _____) for a total amount of SGD _____ for the purchase of 4Life Products/materials
on _____.

I understand that by signing this authorization letter, I am fully aware of the above charge and will not hold
ForLife Research accountable for any dispute that may arise.

Attached, please find a copy of the said credit card for your further action. If you have any queries, please do not
hesitate to contact me.

Thank you

Yours sincerely,

Signature of Credit Card Holder

(As appeared on Credit Card)

NRIC No : _____