

DISTRIBUTOR BANK & ADDRESS INFORMATION

AUTHORIZATION OF PAYMENTS ON eWALLET

Tianshi GmbH
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PLEASE FILL IN BLOCK LETTERS AND ENCLOSURE YOUR ID CARD OR PASSPORT COPY!

Put a Cross (x) in the relevant box

Bank

Address

eWallet

A. PERSONAL DETAILS: Please indicate MR MRS MISS MS	
1. Surname:	Forename:
2. ID Number:	3. Telephone:
Previous Address:	New Address:
4. Post Code:	5. Post Code:
6. Email:	

B. BANK DETAILS:	
7. Name of the Bank:	
8. Address of Branch:	
9. Bank Sort Code:	10. Bank Account Number:
11. Account Holder's Name:	
If 1 is different from 11, Please sign below and provide the written authorization letter : I would like Tianshi GmbH to pay my entire commission to the account that I have provided above until further notice. Signature: Date:	

C. eWALLET:
<input type="checkbox"/> I would like Tianshi GmbH to transfer my entire commission to my eWallet account until further notice. eWallet funds can only be used by myself unless I give Tianshi GmbH permission for another distributor to use them on my behalf. Signature: Date:

D. TAXATION:
Please note: As a Direct Selling Distributor, You are responsible to pay tax by yourself after you receive commission from us. Please contact your local Inland Revenue Office, asking for details depending on your own situation.

I declare that the information I have provided above is true and I have been informed that I am responsible to pay tax for any commission I receive from Tianshi GmbH. Also I have provided the proof of my identification (Passport / Driving license).

Signature: Date:

For Office use only:	
Received by:	Received on:
Authorised by:	Date: