

MONTHLY COMMISSION INFORMATION

NU SKIN INTERNATIONAL INC. ONE NU SKIN PLAZA, 75 WEST CENTER STREET, PROVO, UTAH, 84601, U.S.A.

PLEASE FAX THE COMPLETED FORM TO 0808 1017 232 OR SEND IT TO : NU SKIN SCANDINAVIA A/S • Sydhavns Plads 12, 2450 Copenhagen SV, Denmark



Please complete in CAPITAL LETTERS and black ink. All information is required unless otherwise indicated.

ID no.

First name

Date of birth (DD/MM/YY)

Last name

MONTHLY COMMISSION INFORMATION - As an Independent Distributor you must provide bank account details to enable your local Nu Skin office to deposit commission payments into your account. The bank account details must be in the name of one of the applicants or the business entity if you have applied under a company name.

Bank name (must be located in the United Kingdom)

Account holder's first name

Account holder's last name

Sort code

United Kingdom IBAN

BIC (SWIFT) code.

You can view your commission statements online via all our Company web sites. Log in to any Nu Skin site and go to My Office > Navigator (V&G) > Commission Statements. If you wish to receive printed statements via the post, please contact your local Distributor Services department.

Applicant's signature

Co-applicant's signature (if applicable)

Co-applicant's signature (if applicable)

Date (DD/MM/YY)