

Name : _____
 WA ID# : _____ Date : _____

What type of Order is this? SG OTG (SGD) US Product (USD)
 Please Select One: Standard Order LRP Order Points Order

Please ship my Order to the following address:

Name : _____
 Address Line 1 : _____
 Address Line 2 : _____
 Postal Code : _____
 Phone No. : _____

Include the following in my Order:

SKU	Item Name	Unit Price	Unit PV	Qty	Total Price	Total PV
Subtotal Price and PV						

Please pay use my: AR Balance Credit Card on File (Last 4 Digit)

Please pay using a new credit card:	Name on Credit Card	_____	Signature: _____
	Credit Card Number	_____	
	Expiration Date (mm/yy)	_____	
	Security Code (CVV)	_____	

If the AR Balance does not have sufficient funds to cover the entire order please charge the remainder to (Select One):

Credit Card on File Credit Card Listed Above