



Car Bonus Application

Please make a copy of this original and retain it for future use. Fill out the copy and mail it to the address listed below or fax it to 801.409.8079

[FORM 108 US]

Applicant Information

Date: month day year
 / /



applicant last name (please print)	first name	middle initial	distributor ID number
address (street)		city	state zip
phone	fax	mobile (not required)	email address

Qualification

You must be a 3-Star Master Distributor or higher with a total monthly compensation of \$2,000 or more. You will receive an additional 15% of your total monthly compensation up to \$1,000. This bonus is for the monthly car payment of a 2 year-old or newer car to advertise the success of your SISEL business.

Terms and Conditions

I hereby submit Application to participate in the Car Bonus Program. I declare that I am a 3-Star Master Distributor with monthly compensation totaling at least \$2,000. I have purchased a new car. I am including a copy of the finance contract for my new car.
I understand that any month I do not qualify for the Car Bonus, it will not be paid or accrued.

applicant signature		co-applicant signature	
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