

DISTRIBUTOR APPLICATION

SECTION 1 – COMPANY INFORMATION

1. Official Company Name

2. Company aliases or DBAs

3. Company Details

Country of Operation:

Type of Business: Distributor Retailer Ecommerce Other

If other, what type?

Channel: Health/Natural Markets Pharmacy/Practitioners Specialty Retailers Supermarket
 Other

If other, what type?

Jurisdiction of Company Formation:

4. Company's complete registered mailing address

5: Company's complete billing address (if different)

6. Other Company locations and how long at each location
(e.g., branch offices, warehouses, retail operations, etc.)

7. Please provide a summary of Company's business activities and business model

8. Primary Company Contact Information

Name:

Title:

Email:

Phone:

9. Requests

Requested Territory:

Requested Brand(s):

10. List Company's executive officers and their titles, as well as any beneficial owners.

11. Is the Company owned or controlled by a government official, including any employee of a state-owned entity?

Yes No

If yes, please provide additional information below:

12. Does Company have any affiliated companies or is it owned by a parent company?

Yes No

If yes, please provide information about the affiliated companies or parent company below:

13. Please list any business licenses, including regulatory licenses that Company has currently.

14. Number of years Company has been in business?

15. Please provide your company's website URL(s)

SECTION 2 – LEGAL, REGULATORY, AND COMPLIANCE

16. Does Company have policies and procedures in place that are compliant with the latest applicable Anti-Bribery, Corruption, and Fraud laws and regulations?

Yes No

If yes, will Company provide the policies and procedures to us if requested?

17. Is Company willing to sign a distribution agreement that requires it to comply with applicable anti-bribery and anti-corruption laws, including the Foreign Corrupt Practices Act?

Yes No

18. Does Company have a process to ensure that business conducted in any potential authorized territory is in accordance with applicable local laws and regulations?

Yes No

19. Has Company or any of its owners, officers, directors, employees or other members been a party to any material litigation, regulatory action, or enforcement proceedings related to Company's sales, marketing or other business areas?

Yes No

If yes, please attach an explanation that addresses the matter(s):

20. What is the process for registering products in your requested territory, if any?

21. What customs or other regulatory issues will prove most challenging to import or sell our products into your requested territory?

SECTION 3 – MARKETING, PROMOTION, AND SALES

22. Please provide a detailed explanation of Company's strategy to promote and market our products in the requested territory.

23. What marketing strategies and partnerships will Company use to penetrate the requested Territory's market?

24. What strategic sales channels will Company operate in (e.g., Health Food Store, Pharmacies, Clinics, etc).

25. What existing relationships does Company have with sales partners such as retail outlets or pharmacies?

26. Does Company have internal procedures in place to ensure that any advertising or marketing materials created to promote our products are done so in accordance with applicable laws and regulations?

Yes No

27. What is Company's anticipated sales volume of our products for the upcoming calendar year?

28. What is the size of Company's sales staff that will be devoted to marketing and selling our products?

29. Please list any other brands or products Company sells or represents?

SECTION 4 – SHIPPING INFORMATION

30. Company's Shipping Address (if different than answer provided in Question 3)

31. Shipping Method

Ocean Air Both

32. Freight Forward

Yes No

33: Please provide the Freight Forward Company's Name, Primary Contact, and Contact Information (phone, email and address).

SECTION 5 – PAYMENT METHOD

34. Preferred Payment Method: Wire Credit Card

SECTION 6 – CERTIFICATION

Disclaimer: Au Naturel reserves the right, in its sole discretion, to determine which customers or potential customers may purchase its products, and what selection or combination of products, if any, are available to each approved customer. Au Naturel also reserves the right, in its sole discretion, to sell to any party, to refuse to sell to any party, or to cease selling to any party.

I certify that I have read and accept the above Disclaimer and that the information provided in the sections above is complete and accurate.

Completed By: _____

Signature: _____ Date: _____

Title: _____