

QUANTUM RELIEF INC.

1223 Birchcliffe Crescent
RR # 4 Orillia ON CANADA L3V 6H4
Tel: 705-238-9967 Fax: 705-323-9333

IMPORTATION AGREEMENT - US PURCHASERS

1. I fully declare that I am importing an EPFX Biofeedback System (hardware) and the computer program (software).
2. I declare that the hardware and software are for my personal use and not for resale;
3. I take and assume full import responsibilities of shipping, duties, taxes and others;
4. I will wire the purchase price to K&H Bank of Budapest, or I will make other arrangements to pay;
5. I have three (3) days after delivery to return the hardware/software. International Law fully protects my rights.
6. I will receive a full warranty on all software and hardware for one year from the date of purchase;
7. I understand that it may take three to four weeks for delivery.

Signature: _____

Date: _____

Print Name: _____

OFFICE INFORMATION - PLEASE PRINT CLEARLY

1. Name of purchaser/importer _____
2. **Contact numbers:** Work _____ Fax _____
Home _____ e-mail _____
3. Import Address to be shipped to: _____
4. Computer Updates sent to: _____
5. My Profession licenses, qualifications, or background: _____
6. I was referred by: (name of network person): _____
7. Date money sent: _____ Method of payment
_____ Wire Transfer _____ Money Order
_____ Credit Card (MasterCard, VISA)

PAYMENT INSTRUCTIONS

WIRE TRANSFER TO:

Scotiabank
2200 Yonge Street
Toronto ON M4S 2C7 CANADA
Swift code: NOSUS33
Institute Code 0002
Transit # 02162
Account # 02162 00389 11

CREDIT CARD PAYMENTS:

Amount of payment: _____
Name on Card: _____
Expiry Date: _____
Billing Address: _____
Signature: _____

MAIL MONEY ORDERS TO:

Quantum Relief Inc.
1223 Birchcliffe Crescent
RR # 4 Orillia ON CANADA L3V 6H4

FAX THIS IMPORTATION AGREEMENT AND WIRE TRANSFER FORM TO Quantum Relief Inc. at 1-705-323-9173