

PLEASE FILL UP THIS FORM AND FAX IT TO US
AT +86+10+58374957

1. Your business entities:

Sole proprietorship Partnership Limited company Corporation

Other:

2. What business are you in?

3. Which areas are covered?

4. How many employees you have?

Sales: people Technicians: people

5. How do you plan to sell cnqueue's products?

6. Your contact information:

Signature: _____

Date: _____