

PRO-FORMA

sanofi-aventis south africa (pty) ltd

Attention: Mbavhalelo Jade, Tshikosi

Address: sanofi-aventis south africa (pty) ltd 44 on Grand Central Office Park | 2 Bond Street | Grand Central Ext. 1 | Midrand | 1685|

Tel: 011 847 5258

Email: Jade..tshikosi@sanofi.com

VAT Number: 4440163949

PO Number: E001916562

Pro-Forma Date

2019-03-27

Invoice No

INV-1656-000055

Workshop Code

1656

South Africa Association of Pharmacists in Industry

52 Glenhove Rd

Melrose Estate

2196

Introduction to Pharmacovigilance in SA**Workshop Date:** 2019-07-11**Non-Members**

Name	Email	Diet	Total
Jade Tshikosi	Jade.tshikosi@sanofi.com	None	R2900.00
Unarine Ganyani	Unarine.Ganyani@sanofi.com	None	R2900.00

Special Dietary Requirements

- Halaal R276.00 per person
- Kosher R483.00 per person
- Vegetarian no charge

Total: R6,800.00

PLEASE NOTE: In the event of cancellation, notice must be given in writing at least 7 days prior to the date of the training workshop, failing which full registration fees will be due. No refunds can be given for failure to attend without 7 days prior notice. Transfer of the registration to a colleague is permitted if written notice is given two days before the workshop.

Banking Details

SAAPI

Standard Bank

Arcadia Branch (010845)

Account 013045156

Email

info@saapi.org.za

Tel (0)11 442 3615 ext 316**AS A REFERENCE PLEASE USE "INV-1656-000055"**