

# INVOICE

**ECAT**

Attention: Hugo, Gauthier  
Address: 589 Rudolph  
Tel: 0129932870  
Email: [ecatonline@system@gmail.com](mailto:ecatonline@system@gmail.com)  
VAT Number: 1234566  
PO Number: PO1

**Invoiced Date**  
2019-5-6

**Invoice No**  
INV-1658-000077

**Workshop Code**  
1658

**South Africa Association of  
Pharmacists in Industry**  
52 Glenhove Rd  
Melrose Estate  
2196

**Biologics**

**Workshop Date:** 2019-07-31/2019-8-01

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**SAAPI Members**

| Name | Email  | Diet          | Total    |
|------|--|---------------|----------|
| hugo | <a href="mailto:sales@epublisher.co.za">sales@epublisher.co.za</a> | Halaal (R276) | R6076.00 |

**Special Dietary Requirements**

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

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**Total: R6,076.00**

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**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](mailto:info@saapi.org.za)

**Tel** (0)11 442 3615 ext 316

**AS A REFERENCE PLEASE USE "INV-1658-000077"**