

## **PRO-FORMA**

Attention: Hugo, Gauthier

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VAT Number: 1234566

**Pro-Forma Date** 2019-5-6

**Invoice No** INV-1658-000071

**Workshop Code** 

1658

South Africa Association of Pharmacists in Industry

52 Glenhove Rd Melrose Estate 2196

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

**SAAPI Members** 

**Biologics** 

Name **Email** Diet Total

sales@epublisher.co.za Halaal (R276) R6076.00 hugo

Non-Members

Diet **Total** Name **Email** 

hugo again info@business2africa.com None R6800.00

## **Special Dietary Requirements**

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

Total: R12,876.00

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 7days 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

info@saapi.org.za

Tel (0)11 442 3615 ext 316

AS A REFERENCE PLEASE USE "INV-1658-000071"