

LIVER ATLAS AND CASEBOOK ORDER FORM



Name: _____

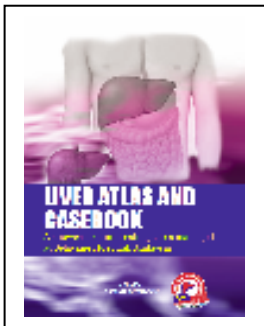
Organization/Institution: _____

Mailing Address: _____

City: _____ Postcode: _____ Country: _____

Tel: _____ Mobile: _____ Fax: _____

Email: _____



- RM150/unit of Liver Atlas and Casebook
Delivery charge: RM10/book (West Malaysia)
RM15/book (East Malaysia)
- USD150/unit of Liver Atlas and Casebook
(Delivery charge: USD50/book)

I would like to purchase _____ unit of Liver Atlas and Casebook.

Mode of Payment

Enclosed is my total payment of *RM/USD forunit of Liver Atlas and Casebook to be made through: (please tick appropriate box)

- Cheque/ Bank Draft** - payable to 'YAYASAN HEPAR MALAYSIA' **Cash**
- Telegraphic Transfer** (Account no: 0538-11-000031-0) **Local Purchase Order (LPO)**
(Bank: EONCAP ISLAMIC BANK BERHAD)
(Branch: TAMAN SRI HARTAMAS, KUALA LUMPUR)
- Credit Card:** I hereby authorized the Malaysian Liver Foundation to debit the total amount of *RM/USD _____ from my credit card for the settlement of the above charges.

Name of Card Holder: * **VISA / MASTER Card**

Card Number: Card Issuing Bank:

CBC Code (last 3-digit numbers on the reverse side of card): Expiry Date: (mm/yy):

Card Holder's Signature: Date (dd/mm/yy):

Kindly forward registration form and payment to:

Malaysian Liver Foundation
No. 26 Block C, Jalan PJU 1A/3
Taipan Damansara 2, Ara Damansara
47301 Petaling Jaya, Selangor
Fax no: 03-78426108

For enquiries, please contact Ms Roziyah /Mdm Ong at 03- 7842 6101 or email roziyah@liver.org.my / pohsim@liver.org.my

* **PLEASE DELETE WHICHEVER NOT APPLICABLE**