

KENYA MEDICAL DIRECTORY

2018/19 EDITION

ORDER FORM

Express Communications Ltd, Maendeleo House, 2nd Floor, Loita/Monrovia Streets Junction
P.O. Box 56645, Nairobi 00200, Kenya, Tel: +254-20-2651296,

E-mail: info@expressmediakenya.com, Website: www.healthcareinkenya.com

DIRECTORY SECTION

PIN No. P000602127H **VAT No. 0103706 M** **Order No. KMD** _____

Name of Firm _____

Classification _____ Sub-classification _____

Physical Location _____ Town/City _____

County _____ Region _____

P.O. Box _____ Town _____ Code _____

Tel _____ Fax _____

E-mail _____ Website _____

Nature of Business _____

Space Code: _____ Type (Colour/Black & White) _____

Amount payable(KShs/US\$) _____ In words: _____

WEB ADVERTS SECTION

Digital Order No. _____

Name of Firm _____

Classification _____ Sub-classification _____

Physical Location _____

County _____ Region _____

P.O. Box _____ Town _____ Code _____

Tel: _____ E-mail: _____

Website: _____

Nature of Business _____

Web Advert Web Link *Tick as appropriate*

Amount payable (KShs/US\$) _____ In Words: _____

This Order must be signed by an authorised signatory e.g Partner, Managing Director, General Manager, Marketing Manager, Finance Manager, Company Secretary, etc. All payments to **Express Communications Ltd**. Payment/LPO is required to confirm booking. Rates include 16% VAT.

Note: Any payment which remains outstanding 45 days after receipt of invoice will attract five(5) per cent interest per month until full settlement is made. The publisher reserves the right of arranging the adverts appropriately unless the advertiser specifies on this contract.

Name of person giving order: _____ Title: _____

Signature: _____ Date _____

Sales Person: _____ Official Stamp: _____