

THE KENYA MEDICAL DIRECTORY@ 25 CONVENTION

2019/20 EDITION

At the Ultra- modern Sarit Convention & Exhibition Centre, October 1- 2, 2019

Theme: Promoting Kenya as a Regional Healthcare Hub

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

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: _____

Note: Advertisers who book one section together with Expo space will enjoy 10% discount. Those who book the two sections together with Expo space will enjoy 20% discount.

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.

This Penalty does not apply to Expo payments which must be made before the date of participation.

Name of person giving order: _____ Title: _____

Signature _____ Date _____

Sales Person: _____ Official Stamp: _____