

FORM : 11

Company Name:		Stand No:	
Postal Address:		Level:	
		Tel No:	
		Fax No:	
		Email:	
Co VAT Number :		Signature:	
Person Responsible for stand on site		Onsite contact Cell No:	

[illegible]

	R300.00	R
SUB TOTAL		R
25% SURCHARGE		R
14% VAT		R
TOTAL DUE		R

sashah@gl-events.co.za