

Kuala Lumpur 3rd October 2012

1. i) Full Name (Capital Letters) :

ii) No. I/C :

iii) Designation :

2. i) Full Name (Capital Letters) :

ii) No. I/C :

iii) Designation :

3. i) Full Name (Capital Letters) :

ii) No. I/C :

iii) Designation :

4. i) Full Name (Capital Letters) :

ii) No. I/C :

iii) Designation :

5. Organisation :

6. E-mail :

7. Address :

Lembaga Hasi Dalam Negeri
Cawangan Wangsa Maju (W. Persekutuan)
Tingkat Bawah, M & 6-10 Menara Kausa
Jalan 3/27A, Seksyen 1
Bandar Baru Wangsa Maju
53300 Kuala Lumpur

8. Tel / HP :

9. Fax :

10. Dietary requirements :

☐

Normal

☐

Vegetarian

☐

Others, please specify _____

I/We hereby enclose :-

☐

Cash (RM) _____

☐

Personal Cheque / Banker's Order _____ for (RM) _____

☐

Company Cheque _____ for (RM) _____

*** Payment**

Cheque should be crossed and made payable to
"INLAND REVENUE OFFICERS' UNION".
Please indicate **NTS 2012**, your name and contact
number on the reverse side of the cheque.

*** Invoice**

This page serves as our official invoice.
No further invoice will be issued.

* For Malaysian outstation cheque, a surcharge of RM0.50 is required to be included in the total cheque amount.