

National Day Celebration Dinner on 20 September 2012 Reply Form

(Please return by 24 August 2012)

To: Finance & Operations Department, Hong Kong Institute of CPAs 37th Floor, Wu Chung House, 213 Queen's Road East, Hong Kong.

2287 7009 (May Hung) / 2287 7089 (Canace Leung)

For payment enquiry:

For event enquiry:

Table reservation			MCS-2 Event Code: ND12		
(A)	Our organisation / I would like to reserve seat(s) / table(s) for the above celebration dinner:				
	□ \$5,000 per table x	table(s) of 12	\$		
	□ \$418 per person x	person(s)	\$		
	Please mail the dinner tickets t	to the following address:			
 Nev	vspaper supplement		MCS-2 Event Code: ND1209		
(B)	Our organisation / I would like to be listed in the compliments section of the two Chinese newspapers supplement (Ming Pao and Wen Wei Po):				
	□ \$500 for one entry (name only)				
	□ \$500 for one entry (name	e only)			
	• ,	• *			
Luc	• ,	listed:			
	Name (in Chinese) to be	listed:			
<u>Luc</u> (C)	Name (in Chinese) to be ky draw / Table prize Our organisation / I would like	listed:			
	Name (in Chinese) to be ky draw / Table prize Our organisation / I would like	to donate the following pr			
	Name (in Chinese) to be ky draw / Table prize Our organisation / I would like	to donate the following pr	ize(s) for the above celebration dinner:		
(C)	Name (in Chinese) to be ky draw / Table prize Our organisation / I would like Lucky draw Brief description of the prize:	to donate the following pr	ize(s) for the above celebration dinner:		
(C)	Name (in Chinese) to be ky draw / Table prize Our organisation / I would like Lucky draw Brief description of the prize:	to donate the following pr	ize(s) for the above celebration dinner:		
(C)	Name (in Chinese) to be ky draw / Table prize Our organisation / I would like Lucky draw Brief description of the prize: the of member / organization: that person:	to donate the following pr	ize(s) for the above celebration dinner:		

Payment by:	(Bank:)				
For payment by credit card, please fill in the following:	Card no.:					
Cardholder's Name : (please print)	Card Expiry Date (month/year) :					
Date :	Cardholder's Signature :					
Cheque should be made payable to "Hong Kong	FOR OFFICE USE					
Institute of Certified Public Accountants"	Auth. code no.	Handled by	Date			
☐ Please put a "✓" if you require a receipt and indicate your choice of delivery: ☐ by email ☐ by post						