



## PAYMENT REPLY FORM

### BY BANK TRANSFER

**PAYABLE TO : EFAS 2009**

**I.B.A.N.:** ES16 2065 0018 4114 0021 7345

**S.W.I.F.T. ADDRESS (BIC CODE):** CECAESMM065

**BANK:** CAJA GENERAL DE AHORROS DE CANARIAS. 018 PLAZA WEYLER.

**ABI 2065 - CAB 0018 - CONTROL NUMBER:** 41 **ACCOUNT NO.:** 1400217345

Be sure to print your Company Name on the bank receipt. A copy of the money order must be attached to the Sponsorship / Exhibit Reply Form. Please note that all bank charges for the bank transfer must be cleared by your company.

### BY CREDIT CARD

Please print the following authorization and send it by FAX (+34 922 670 188) or EMAIL (congresos@magnacongresos.com):

|   |              |              |
|---|--------------|--------------|
| I authorize <b>EFAS2009</b> to charge to my Credit Card the total amount due: |              | <i>Euros</i> |
| Credit Card No:   | Expiry Date: |              |
| Name of Credit Card holder:   |              |              |
| Date:   | Signature:   |              |
|   |              |              |

You can download a copy of this Reply Forms at:

<http://www.auditio.com/congresos/efas2009/docs/prospectus.pdf>