

Dr. Yogender Sharma

M.B.B.S., D.M.R.E., D.R.M., (Dom)

CONSULTANT IN RADIOLOGY & RADIATION MEDICINE

X-RAY CLINIC BY CHOICE



Yogender X-Ray House (P) Ltd.

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To Whomsoever

Subject: Acceptance of invitation for Medifex.

Dear Sir,

We wish to participate at Medifest, premier medical & healthcare trade event, scheduled as on December 5-7, 2008 at Pragati Maidan, New Delhi and accept the invitation as "Special Invitee" at the event. We shall be very pleased to join the session.

I along with my institutional members aspire to be at Medifest along with its concurrent happening conferences. Please do issue us the pre-registered delegate passes for our visit.

Wish you all the best for the event!

Sincerely,

Yogender

Sign & Stamp

Dr. Yogender Sharma
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Yogender X-Ray House (P) Ltd.
E-5/34, Krishna Nagar, Delhi-51
Code No.: 335116

Title..... *Dr.* Full Name..... *YOGENDER SHARMA*

Designation..... *DIRECTOR*

Institution..... *YOGENDER X-RAY HOUSE (P) LTD*

Contact Details..... *E-5/34, KRISHNA NAGAR, DELHI-51*

Phone No. (1) *22095090* (2) *22095210* (3).....

Fax..... Mobile.....

E-Mail..... Web.....

No. of Beds in institution..... *N.A*

Any future expansion plans..... *Yes*

Any in-house pharmacy in hospital..... *No*

If yes, tick mark the relevant option : Private Hospital Owned

To serve you better, kindly handover this filled form either by mail/fax/post or by hand at :
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Mail at : info@vantagetradefairs.com