







Photographer's Copy

PHOTO FORM

E- MAIL ADDRESS :	
PLEASE FILL UP CLEARLY (USE BLOCK LETTER)& Send back to us tog	gether with your robe order form.
Your photo will be send to you according to your address as below:	
NAME	
ADDRESS	
CITY P.CODE	<u> </u>
STATE	
COUNTRY	REF: for office use only
TELEPHONE (OFF)	
(HSE)	
(H/P)	
UNIVERSITY : <u>University of Nottingham</u> COURSE/MAJ	OR:
CEREMONY DATE : 18/2/2017	
PACKAGE:	ABCDE
TOTAL PAYMENT:	
	•••••
Customer's Copy	
Ede and Ravenscroft (M) Sdn Bhd Suite A-07-10 Block A, Plaza Mont Kiara, No.2 Jalan Kiara, Mont Kiara, Kuala Lumpur. Malaysia Ede ERuvenscroft Tel: 03-62031964 / 03-62035815, Fax: 03-62035326, Email: enrm1689@gmail.com	

University Name : University of Nottingham

Ceremony Date: 18 February 2017

WE ACKNOWLEDGE RECEIPT OF YOUR TOTAL PAYMENT FOR THE AMOUNT ___

Package: A B C D E

Ref:

BUSINESS HOURS:

⇒ 10.00 A.M. TO 6.00P.M.

∼ Weekdays ; 10.00 A.M. TO 1.00 P.M.

∼ Saturday

⇒ CLOSED ON SUNDAY & PUBLIC HOLIDAYS