## Annex 1

## **Reply Slip**

Details of sponsorship	
Member receiving the sponsorship	
Name of the program/activity	
Date	
Name of sponsor	Ruttonjee and Tang Shiu Kin Hospitals Doctors' Association Limited
Please ✓ in the appropriate box:	
(a) Whether the sponsorship is funded ☑ Yes	by any commercial company/companies?
Name of the company	
Nature of business	Pharmaceutical company
□ No, the reason being:	
☐ Central fund / multi-sources	
☐ Others (please specify)	
(b) If (a) is yes, whether the commercia over the nomination process of the rec	I company/companies involved, has/have any influence ipient of sponsorship?
□ Yes	
☑ No	
Signature	
	2291 2000
Name / Title	Day-time contact
Ruttonjee and Tang Shiu Kin Hospitals Doctors' Association Limited	S
Name of organisation	Date