



**Adventist Health White Memorial's
6th Annual Cardio-Cerebral Symposium
Friday, August 23, 2024**

Vendor Exhibit Space Fee: \$1,500

Name _____

Company Name _____

Company Address _____

Email _____

Phone # _____

Payment method:

Visa

MasterCard

American Express

Check

(Payable to Adventist Health White Memorial)

Credit Card # _____

Amount Paid: _____ Exp. Date _____ 3 digit code _____

Signature: _____

Return form with payment to:

Adventist Health White Memorial Attn:
Cardiology Department c/o Janette Cordon
1720 East Cesar E. Chavez Avenue
Los Angeles, CA 90033

Fax form to:

323-307-8981

For questions call 323-307-8588 x3

