



POST SALES & MARKETING ACTIVITY FORM

Distributor's Details:

Name:	SDMY ID:
Contact Num:	Email Addr:

Events' Particulars:

Event's name:	
Venue:	
Date:	Time:
Event's summary:	
Total collected contacts:	Total sales & sign up:
Event feedback: 1) 2) 3)	

Notice:

- 1) Post Sales & Marketing Form must be submitted to Sami Direct Sdn Bhd within 3 working days after the event. Failure to do so will affect upcoming request.
- 2) Distributor must submit a copy of Contact List and Sales Invoices together with this form.
- 3) Distributor may WhatsApp or email event photos to Business Development team.

Distributor's signature:	Received by: (FOR OFFICE USE ONLY)
Date:	Date:

Sami Direct Sdn Bhd (1032249-X)

Unit T1-L7-2, Level 7, Tower 1, PJ33 Cybercentre, Jalan Semangat, Seksyen 13, 46100 Petaling Jaya, Selangor
Tel: +603 7932 3301 | www.samidirect.com.my | www.sabinsa.com