



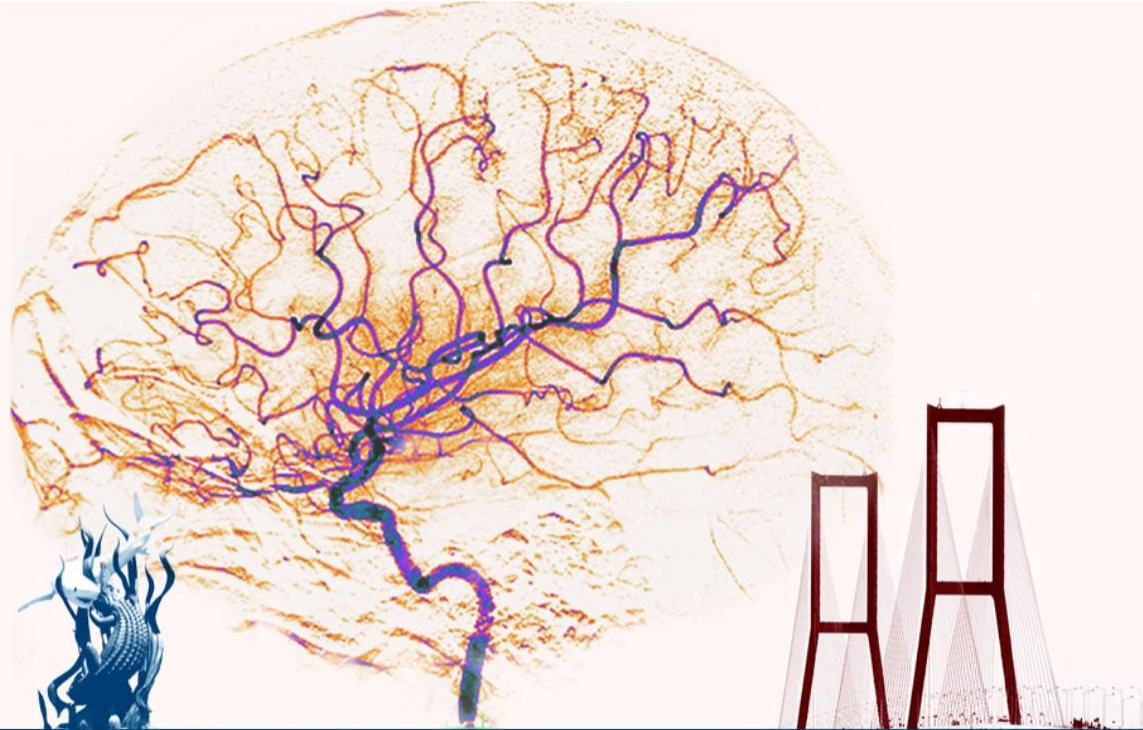
Alur Registrasi Partner PIN PERDOSNI 2024

1. Ketik pinperdosni2024.com pada browser Anda

☎ : Hotline (+62 812 3361 3388)

📄 Sign Up ➔ Sign In

HOME ABOUT ▾ SYMPOSIUM ▾ WORKSHOP ▾ REGISTRATION ▾ SIGN UP ▾



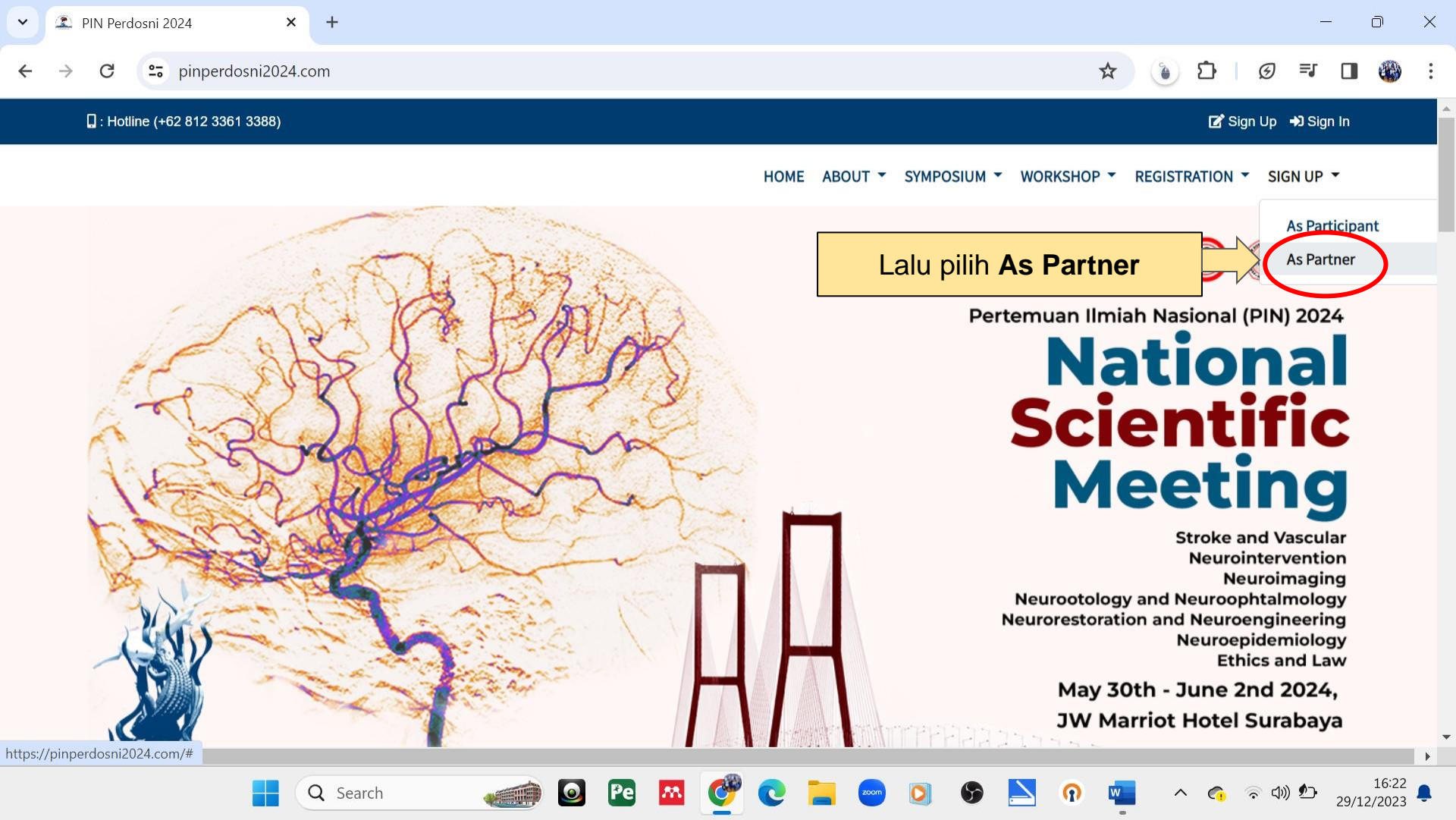
Pertemuan Ilmiah

2. Lalu tekan tombol
SIGN UP

National Scientific Meeting

Stroke and Vascular
Neurointervention
Neuroimaging
Neurotology and Neuroophthalmology
Neurorestoration and Neuroengineering
Neuroepidemiology
Ethics and Law

May 30th - June 2nd 2024,
JW Marriot Hotel Surabaya



☎ : Hotline (+62 812 3361 3388)

📄 Sign Up ↗ Sign In

HOME ABOUT ▾ SYMPOSIUM ▾ WORKSHOP ▾ REGISTRATION ▾ SIGN UP ▾

Lalu pilih As Partner

As Participant
As Partner

Pertemuan Ilmiah Nasional (PIN) 2024

National Scientific Meeting

Stroke and Vascular Neurointervention
Neuroimaging
Neurotology and Neuroophthalmology
Neurorestoration and Neuroengineering
Neuroepidemiology
Ethics and Law

May 30th - June 2nd 2024,
JW Marriot Hotel Surabaya

https://pinperdosni2024.com/#



PIN Perdosi 2024

Partner - Sign Up

E-Mail

Company Name

Division Name

Contact Person Name

Contact Person Phone Number

Password

Confirm Password


Sign Up

Already have an account? [Sign In](#)
[Back to PIN Perdosi 2024 Homepage](#)

Isi informasi data yang dibutuhkan, lalu tekan **SIGN UP**

Link verifikasi akan dikirimkan ke alamat email Anda



 **PIN Perdosni 2024**

Verify Your Email Address

A fresh verification link has been sent to your email address.

Before proceeding, please check your email for a verification link.

[Go to Sign In page](#)

[Back to PIN Perdosni 2024's Home](#)

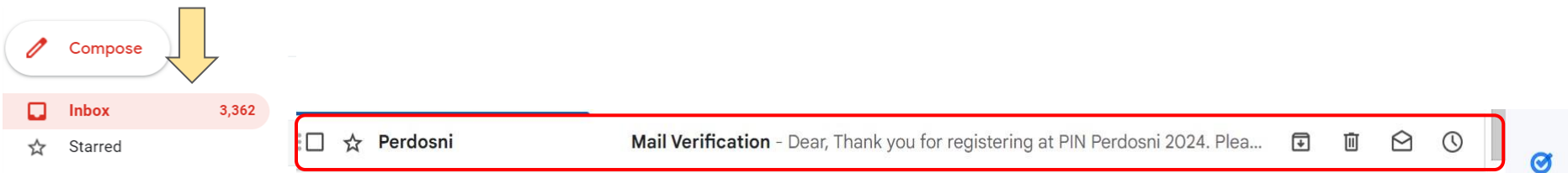


Account Verification

Tahap Verifikasi Akun

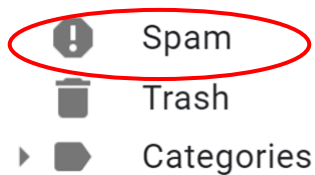
1. Masuk/Login ke alamat email yang anda daftarkan

2. Email **Link verifikasi** dapat dijumpai pada **kotak masuk/inbox**



3. Lalu tekan email: **Mail verification**

Jika email **Link verifikasi** tidak dijumpai pada **kotak masuk/inbox**, maka dapat dijumpai pada spam



Compose

Inbox 3,010

Starred

Snoozed

Sent

Drafts 4

More

Labels +



1 of 3,571 < > [Keyboard icon]

Mail Verification Inbox x



Perdosni <neuro_sby_01@pinperdosni2024.com>

12:15 PM (5 minutes ago)



to me ▾



PIN Perdosni 2024

Dear,

Thank you for registering at PIN Perdosni 2024. Please click button below to complete your registration.

[Click Here to Complete Your Account](#)

If link above doesn't work, copy link address below, then paste into browser url address

[https://pinperdosni2024.com/verifyme.cne?id=PINPERDOSNI2024&token=\\$2y\\$12\\$](https://pinperdosni2024.com/verifyme.cne?id=PINPERDOSNI2024&token=$2y$12$)

Setelah mendapat email dari Panitia, maka klik **“Click Here to Complete Your Account”**





PIN Perdosni 2024

Account Activated

Your account completely activated

Start your access into PIN Perdosni 2024 now

[Go to Sign In page](#)

Akun anda telah teraktivasi,
Anda dapat login dengan
menekan tautan/link **Go to Sign
in Page**



Login & Cart Order

Login & Transaksi Pemesanan

Masuk/Login ke alamat email yang anda daftarkan



PIN Perdosni 2024

Sign In

Isikan username dengan alamat email yang sudah terdaftar

kentangditaman@gmail.com

Isikan password dengan alamat password yang sudah terdaftar

.....|

Remember me

Forgot password?

Log In

[Back to PIN Perdosni 2024 Homepage](#)





- neurologi
- Home
- Our Profile**
- Partnership Detail
- Transaction

Our Profile



Select company logo to upload,
company logo type must be
jpg/png

Company Name

Fill company name with full name

Business Unit/Division

Fill in with business unit or division name

Company Address

Fill in with company address, without city name

Company Phone Number

Fill in with company phone number

E-Mail

Fill in with company email address

E-Mail

Fill in with company email address

2. Tekan Tombol "Save"



Category

Select partner category

Product Name

Fill product name aligned with business unit or division name

City of Address

Fill in with city name

Postal Code

5 digit postal code

Compant Whatsapp Number

Fill in with company mobile phone associated with WhatsApp account

Website

Fill in with company website, should started with http:// or https://

Website

Fill in with company website, should started with http:// or https://

Lengkapi data-data yang belum terisi pada "Our Profile"

- Product Name
- Company Address
- City Adress
- Company Phone Number
- Company Whatsapp number
- Email
- Website

- neurologi >
- Home
- Our Profile
- Partnership Detail
- Transaction
- Management User**
- New Order
- List Order
- List Participant Package

Management User

+ Add Refresh

search here...

Search!

⚠ Requested data not available, add more data first

Masukkan data peserta Anda
dengan menekan pilihan
“Management User”



- partnercne2022 >
- Home
- Our Profile
- Partnership Detail
- Transaction
- Management User
- New Order
- List Order
- List Participant Package

Management User

+ Add Refresh

 Search!

⚠ Requested data not available, add more data first



1. Cari nama peserta yang akan Anda berikan sponsor pada bagian ini

Apabila sudah, tekan tombol **Save**

Edit Participant

Login Information

E-mail (Username)

pesertaCNE2022@gmail.com

Participant ID used as member id for log in

Password

.....

Use minimal 6 character, combined with smallcase, uppercase, number and symbol

Repeat Password

.....

Repeat password to ensure password remembered

Participant Info

Participant Name

Contoh peserta CNE

Fill participant name with full name

Name on Certificate

Contoh peserta CNE

Fill participant name for Certificate

Organization/Institution/Company

UNAIR

Fill company/organization name

Participant Type

Specialist

Select participant type

Address

Jln Pegangsaan Timur

Fill in with participant address, without city name

City of Address

Jakarta

Fill in with city name

Gender

Male

Select gender type

Phone Number

081234567891

Fill in with participant valid Phone Number

Whatsapp Number

081234567891

Fill in with participant valid WA Number

Lengkapi data-data Peserta Anda

- neurologi >
- Home
- Our Profile
- Partnership Detail
- Transaction

Management User

+ Add

Refresh

search here...

Search!



Requested data not available, add more data first

Jika Anda tidak dapat menemukan nama peserta Anda, Anda dapat menambahkan dengan menekan tombol **Add** diatas

neurologi

Home

Cancel Save

Apabila sudah, tekan
tombol **Save**

New Participant

Login Information

E-mail (Username)

Participant ID used as member id for log in

Password

Use minimal 6 character, combined with smallcase, uppercase, number and symbol

Repeat Password

Repeat password to ensure password remembered

Participant Info

Participant Name

Fill participant name with full name

Name on Certificate

Fill participant name for Certificate

Organization/Institution/Company

Fill company/organization name

Participant Type

Select participant type

Address

Fill in with participant address, without city name

City of Address

Fill in with city name

Gender

Select gender type

Phone Number

Fill in with participant valid Phone Number

Whatsapp Number

Fill in with participant valid WA Number

Lengkapi data-data
yang belum terisi pada:

1. E-Mail (Username)
2. Password
3. Participant name
4. Name on Certificate
5. Organization/institution/company
6. Participant type
7. Address and City
8. Gender
9. Phone number
10. Whatsapp number

- neurologi
- Home
- Our Profile
- Partnership Detail
- Transaction
- Management User
- New Order
- List Order
- List Participant Package

Management User

[+ Add](#)[Refresh](#)

search here...

Search!







10

Rows

show 1 of 1

Go To: 1

« < 1 > »

| Member ID/Name | Type | Organization/ Company | Contact | Act |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
|  abcdefghi@gmail.com  dr. X, Sp.N | Specialist | neurologi |  08111111111  08111111111  abcdefghi@gmail.com |  |

Jika Anda menemukan nama peserta, Tekan tombol diatas untuk mengganti/ memperbaiki data peserta



neurologi



Home



Our Profile



Partnership Detail



Transaction



Management User

New Order

List Order

List Participant

Package

Order

Payment Method

Please Choose Payment method



| # | Participant | Package | Price | Action |
|------------------|-------------|---------|-------|--------|
| Package is empty | | | | |

Silakan memulai pemesanan dengan menekan tombol **New Order**



+ Add Package

→ Save

Order

Payment Method

Please Choose Payment method



| # | Participant | Package | Price | Action |
|------------------|-------------|---------|-------|--------|
| Package is empty | | | | |

Add Package

Participant



Tekan Simbol "..."
untuk memilih nama **participant**



+ Add Package

→ Save

Search Participant

| | | | | |
|------------------------------------------------|----------------------------|------------------------|-------------------------------------------|-------------------------------------|
| komyang_niradha@yahoo.com | ni komyang Sri Dewanti | Specialist | RSAL | <input type="checkbox"/> |
| mochammad.ridhwan.soediono-2018@fk.unair.ac.id | Mochammad Ridhwan Soediono | Student | Fakultas Kedokteran Universitas Airlangga | <input checked="" type="checkbox"/> |
| msc.dr.ninafitriana@gmail.com | Nina Fitriana | GP (General Physician) | Klinik Nafira | <input checked="" type="checkbox"/> |
| nobelbudiputra@gmail.com | Nobel Budiputra | GP (General Physician) | UPH | <input checked="" type="checkbox"/> |
| abcdefghi@gmail.com | dr. X, Sp.N | Specialist | neurologi | <input checked="" type="checkbox"/> |
| ppdsneuro2020@gmail.com | PPDS | GP (General Physician) | RSUD dr Soetomo | <input checked="" type="checkbox"/> |
| Sylvania.vani@gmail.com | Sylvania Purnamawati | GP (General Physician) | RS Pantai Indah Kapuk | <input checked="" type="checkbox"/> |

Close

Pilih participant yang dipilih, lalu tekan simbol **Centang**

Order

Payment Method

Please Choose Payment method



| # | Participant | Package |
|------------------|-------------|---------|
| Package is empty | | |

Tekan Simbol “...”
untuk memilih **package**

Add Package

Participant

...

X

Package

...

X

+ Add Package

→ Save



- neurologi
- Home
- Our Profile
- Partnership Detail
- Transaction

Order

Payment Method

#

Add Package

Participant

Add Package

... X

Save

Package

Category

| No | Package | Type | Price (IDR) | Action |
|----|----------------------------|------------------------|-------------|-------------------------------------|
| 1 | JW Marriott Deluxe Premium | Specialist | 1,500,000 | <input checked="" type="checkbox"/> |
| 2 | Symposium | GP (General Physician) | 2,000,000 | <input checked="" type="checkbox"/> |
| 3 | Symposium | Resident | 2,000,000 | <input checked="" type="checkbox"/> |
| 4 | Symposium | Specialist | 3,000,000 | <input checked="" type="checkbox"/> |
| 5 | Symposium | Student | 1,000,000 | <input checked="" type="checkbox"/> |
| 6 | testing | Specialist | 11,000 | <input checked="" type="checkbox"/> |

Close



Pilih package yang dipilih, lalu tekan simbol **Centang**



- neurologi >
- Home
- Our Profile
- Partnership Detail
- Transaction >

Order

2. Maka akan muncul package yang dipilih pada kolom ini

Payment Method

Cash

| # | Participant | Package | Price | Action |
|---|------------------------------------|-----------------------------------------------------------------------------|---------|--------|
| 1 | abcdefghi@gmail.com dr. X, Sp.N | JW Marriott Deluxe Premium Check In: 2024-04-15 Check Out: 2024-04-18 | 4500000 | |

Add Package

Participant

dr. X, Sp.N

...

x

Package

JW Marriott Deluxe Premium

...

x

ID : abcdefghi@gmail.com

Type : Specialist

Price : Rp. 1,500,000

Check In

2024-04-15



Check Out

2024-04-18



Add Package

1. Tekan add package untuk mengkonfirmasi pilihan Anda

→ Save

Order

Payment Method

| # | Participant |
|---|---------------------------------|
| 1 | pesertaCNE202 Contoh peserta |

Cash

- Please Choose Payment method
- Cash
- Voucher
- Guarantee Of Letter
- Virtual Account (ES)
- Manual Transfer
- Group Payment

Pilih metode pembayaran

Add Package

Participant

Contoh peserta CNE

ID : pesertaCNE2022@gmail.com

Package

E-Course Epilepsy

Type : Specialist

+ Add Package

Jika sudah tidak ingin menambah pesanan, tekan tombol **SAVE**

→ Save

Order

Payment Method

Cash

| # | Participant |
|---|------------------------------------------------|
| 1 | pesertaCNE2022@gmail.com Contoh peserta CNE |

Add Package

Participant

+ Add Package



Save Order

Are you sure to save this data? You won't be able to modify this!

Yes, Save it!

Cancel

Price

750000

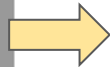
Action



... x

→ Save

Tekan tombol **Yes, Save it**






Pembayaran melalui **Virtual Account**

- neurologi >
- Home
- Our Profile
- Partnership Detail
- Transaction ▼
 - Management User
 - New Order
 - List Order
 - List Participant
 - Package

+ Add --Payment Type-- -- Payment Status -- Participant Name Package Id or No Invoice Search!

10 Rows show 1 of 1 Go To: 1 << < 1 > >>

| Transaction | Invoice To | Total | Payment Type Status Payment Date | Act |
|------------------------------------------|-------------------------------|-----------|-----------------------------------------------------------|-------------------------------------------------------------------------------------|
| ID : 8 No Inv : CNE231230131450598 | RSUD Dr. Soetomo neurologi | 4.500.000 | Payment Type : Cash Status : Payment Document Uploaded |  |

Anda dapat memeriksa daftar pemesanand engan menekan “List Order”

Kemudian klik tombol “detail “ untuk melanjutkan pembayaran tipe pembayaran yang dipilih

Invoice

No Transaction 9 **No Invoice** CNE231230132614208

Invoice To RSUD Dr. Soetomo (neurologi)

Payment Method Manual Transfer **Payment Status** Order Verified

| # | Participant | Package | Price |
|-------|------------------------------------|-----------------------------------------------------------------------------|-----------|
| 1 | abcdefghi@gmail.com dr. X, Sp.N | JW Marriott Deluxe Premium Check In: 2024-04-15 Check Out: 2024-04-18 | 4.500.000 |
| Total | | | 4.500.000 |

Tampilan Invoice

Total

750.000

ES Pay

espay

-- Please Select --

Submit

-- Please Select --

ATM / Virtual Account Transfer

VA MANDIRI

VA PERMATA

Credit Card

Credit Card Visa / Master / JCB / Amex

Direct Debit

e-Pay BRI

PermataNet

Others

VA BNI

VA BRI

VA CIMB Niaga

OCTO Clicks

LinkAja QR Pay

OVO

Pilih tujuan rekening bank
maupun aplikasi penyedia
transaksi pembayaran yang
diinginkan kemudian tekan
“Submit”

List Transaction

© 2021

Show all

×

PEMBAYARAN ANDA BELUM SELESAI

YOUR PAYMENT IS UNCOMPLETED

Cara pembayaran sudah dikirimkan ke shardr1610@gmail.com, harap melakukan pembayaran sebelum tenggat waktu yang telah ditetapkan.

Order Detail

Detail Pesanan

Nama Merchant
Merchant Name : PERDOSSI SURABAYA

Nomor Pemesanan
Order No : CNE220527101123760

Deskripsi
Description : CNE Surabaya 2022 Partner
Order

Tanggal/Jam
Date/Time : 27 May 2022 10:12:00

Jumlah yang harus Dibayar

Total Paid

1.753.885

Nomor Rekening VA (Virtual Account)

Virtual Account (VA) Number

8920800621124457

Nama / Kode Bank Tujuan

Destination Bank Name / Code

Bank Mandiri / 008

Pembayaran anda harus sudah dilakukan sebelum time limit

Transfer Due Date

28 May 2022 10:12:00

Instruksi Pembayaran ATM Transfer

ATM Transfer Payment Instruction

ATM Bersama / Alto

Prima

ATM MANDIRI

Jumlah yang harus Dibayar

Nomor Rekening Virtual Account

Informasi Petunjuk Pembayaran

Selesai

Jika ingin menutup tampilan halaman ini, wajib menekan tombol **“Selesai”**

The background of the slide is a photograph of a large, light-colored building with a prominent arched entrance and a flat roof. The image is heavily dimmed and has a dark blue color overlay. The text is centered over the image.

Pembayaran melalui Manual Transfer



- neurologi >
- Home
- Our Profile
- Partnership Detail
- Transaction** ▾
 - Management User
 - New Order
 - List Order**
 - List Participant
 - Package

| Transaction ▾ | Invoice To : ▾ | Total ▾ | Payment Type ▾ Status ▾ Payment Date ▾ | Act |
|------------------------------------------|-------------------------------|-----------|-----------------------------------------------------------|------|
| ID : 8 No Inv : CNE231230131450598 | RSUD Dr. Soetomo neurologi | 4.500.000 | Payment Type : Cash Status : Payment Document Uploaded | |

Anda dapat memeriksa daftar pemesanan dengan menekan “List Order”

Kemudian klik tombol “detail “ untuk melanjutkan pembayaran tipe pembayaran yang dipilih

Invoice

| | | | |
|-----------------------|------------------------------|-----------------------|--------------------|
| No Transaction | 9 | No Invoice | CNE231230132614208 |
| Invoice To | RSUD Dr. Soetomo (neurologi) | | |
| Payment Method | Manual Transfer | Payment Status | Order Verified |

Petunjuk pembayaran dapat Anda lihat disini

| | | | Price |
|-------|---------------------------------------|-----------------------------------------------------------------------------|-----------|
| 1 | abcdefghijkl@gmail.com dr. X, Sp.N | JW Marriott Deluxe Premium Check In: 2024-04-15 Check Out: 2024-04-18 | 4,500.000 |
| Total | | | 4,500.000 |

Payment instruction

1. Transfer payment into following account :
PERDOSSI CABANG SURABAYA
Bank Jatim Cabang Dr. Soetomo Surabaya
Account Number : 0322917058
2. Take a photo of the "Proof of Transfer"
3. Upload photo into form "Upload Payment Document"
4. Inform administration to verify Payment Payment Verification could take up to 3 working days.

Upload Payment Document

Photo of Payment(jpeg,png,jpg,gif)

[Download](#)

No file chosen

[+ New Order](#)

[Print](#)

[List Transaction](#)

Invoice

No Transaction

9

No Invoice

CNE231230132614208

Invoice To

RSUD Dr. Soetomo (neurologi)

Payment Method

Manual Transfer

Payment Status

Order Verified

| # | Participant | Amount | |
|---|---------------------------------------|-----------------------|-----------|
| 1 | abcdefghijkl@gmail.com dr. X, Sp.N | 4,500.000 | |
| | | Check Out: 2024-04-18 | |
| | | Total | 4,500.000 |

Jika sudah melakukan pembayaran, unggah bukti pembayaran

Payment instruction

1. Transfer payment into following account :
PERDOSSI CABANG SURABAYA
Bank Jatim Cabang Dr. Soetomo Surabaya
Account Number : 0322917058
2. Take a photo of the "Proof of Transfer"
3. Upload photo into form "Upload Payment Document"
4. Inform administration to verify Payment Payment Verification could take up to 3 working days.

Upload Payment Document

Photo Payment(jpeg.png.jpg.gif)

Download

Choose File

No file chosen

Upload

+ New Order

Print

List Transaction

Invoice

No Transaction 9

No Invoice

CNE220524083046747

Invoice To RSUD Dr. Soetomo (neurologi)

Payment Method Manual Transfer

Payment Status

Payment Document Uploaded

| # | Participant | Package | Price |
|---|------------------------------------|-------------------|---------|
| 1 | abcdefghi@gmail.com dr. X, Sp.N | E-Course Epilepsy | 750.000 |

Payment instruction

1. Transfer payment into following account :
PERDOSSI CABANG SURABAYA
Bank Jatim Cabang Dr. Soetomo Surabaya
Account Number : 0322917058
2. Take a photo of the "Proof of Transfer"
3. Upload photo into form "Upload Payment Document"
4. Inform administration to verify Payment Payment Verification could take up to 3 working days.

Choose File No file chosen

Upload

Jika bukti pembayaran telah terunggah,
status akan berubah menjadi **Payment Document Uploaded**

New Order

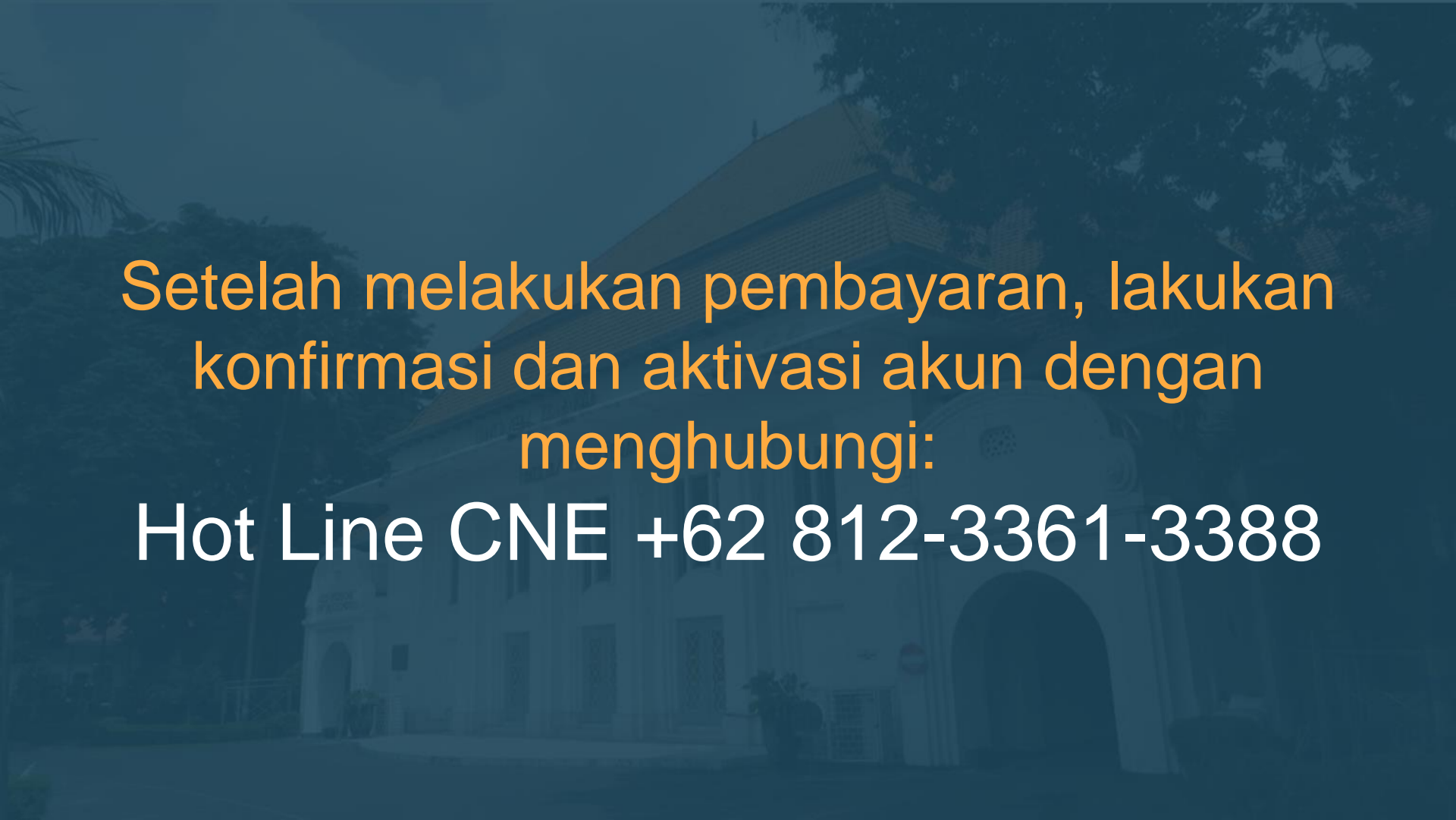
Print

List Transaction

Pembayaran dapat dilakukan dengan
transfer melalui Bank Jatim:

Perdossi Cabang Surabaya

No. Rekening: 0322917058

The background of the slide is a photograph of a large, light-colored building with a prominent arched entrance. The image is dimmed and has a dark blue overlay. The text is centered on the slide.

Setelah melakukan pembayaran, lakukan
konfirmasi dan aktivasi akun dengan
menghubungi:

Hot Line CNE +62 812-3361-3388



Pembayaran Melalui Guarantee of Letter



- neurologi
- Home
- Our Profile
- Partnership Detail
- Transaction**
 - Management User
 - New Order
 - List Order**
 - List Participant
 - Package

| Transaction | Invoice To | Total | Payment Type Status Payment Date | Act |
|------------------------------------------|-------------------------------|-----------|-----------------------------------------------------------|-----|
| ID : 8 No Inv : CNE231230131450598 | RSUD Dr. Soetomo neurologi | 4.500.000 | Payment Type : Cash Status : Payment Document Uploaded | |

Anda dapat memeriksa daftar pemesanand engan menekan “List Order”

Kemudian klik tombol “detail “ untuk melanjutkan pembayaran tipe pembayaran yang dipilih

Invoice

No Transaction

9

No Invoice

CNE231230132614208

Invoice To

RSUD Dr. Soetomo (neurologi)

Payment Method

Guarantee Of Letter

Payment Status

Checkout

Petunjuk pembayaran dapat Anda lihat disini

| | Package | Price |
|-------|-------------------|-----------|
| 1 | Symposium Offline | 1.750.000 |
| Total | | 1.750.000 |

Payment instruction

1. Create Guarantee Of Letter in pdf format
2. Upload pdf into form "Upload Order Document"
3. Inform administration to verify Order Document
4. Transfer payment into following account :
PERDOSSI CABANG SURABAYA
Bank Jatim Cabang Dr. Soetomo Surabaya
Account Number : 0322917058
5. Take a photo of the "Proof of Transfer"
6. Upload photo into form "Upload Payment Document"
7. Inform administration to verify Payment

Upload Order Document

Order Document (Pdf)

Choose File No file chosen

Upload

Upload Payment Document

Photo of Payment(jpeg,png,jpg,gif)

New Order

Print

List Transaction

Invoice

No Transaction

9

No Invoice

CNE231230132614208

Invoice To

RSUD Dr. Soetomo (neurologi)

Payment Method

Guarantee Of Letter

Payment Status

Checkout

| # | Participant | Package | Price |
|-------|------------------------------|-------------------|-----------|
| 1 | cobamember@gmail.com coba | Symposium Offline | 1.750.000 |
| Total | | | 1.750.000 |

Payment instruction

1. Create Guarantee Of Letter in pdf format
2. Upload pdf into form "Upload Order Document"
3. Inform administration to verify Order Document
4. Transfer payment into following account :
PERDOSSI CABANG SURABAYA
Bank Jatim Cabang Dr. Soetomo Surabaya
Account Number : 0322917058
5. Take a photo of the "Proof of Transfer"
6. Upload photo into form "Upload Payment Document"
7. Inform administration to verify Payment

Upload Order Document

Order Document (Pdf)

No file chosen

Upload Payment Document

Photo of Payment(jpeg,png,jpg,gif)

Upload order document

[+ New Order](#)

[Print](#)

[List Transaction](#)

Invoice

No Transaction

9

No Invoice

CNE231230132614208

Invoice To

RSUD Dr. Soetomo (neurologi)

Payment Method

Guarantee Of Letter

Payment Status

Order Document Uploaded

| # | Participant | Package | Price |
|---|------------------------------|-------------------|-----------|
| 1 | cobamember@gmail.com coba | Symposium Offline | 1.750.000 |

Status akan berubah menjadi **Payment Document Uploaded**

Payment instruction

1. Create Guarantee Of Letter in pdf format
2. Upload pdf into form "Upload Order Document"
3. Inform administration to verify Order Document
4. Transfer payment into following account :
PERDOSSI CABANG SURABAYA
Bank Jatim Cabang Dr. Soetomo Surabaya
Account Number : 0322917058
5. Take a photo of the "Proof of Transfer"
6. Upload photo into form "Upload Payment Document"
7. Inform administration to verify Payment

Upload Order Document

Order Document (Pdf)

[Download](#)

No file chosen

Upload Payment Document

Photo of Payment(jpeg,png,jpg,gif)

Hubungi Contact Person untuk verifikasi dokumen yang telah Anda upload



Pembayaran melalui Group Payment

neurologi

Home

Our Profile

Partnership Detail

Transaction

Management User

New Order

List Order

List Participant

Package

+ Add

--Payment Type--

-- Payment Status --

Participant

Name Package

Id or No Invoice

Search!

10 Rows

show 1 of 1

Go To: 1

| Transaction | Invoice To | Total | Payment Type Status Payment Date | Act |
|------------------------------------------|-------------------------------|-----------|-----------------------------------------------------------|-----|
| ID : 8 No Inv : CNE231230131450598 | RSUD Dr. Soetomo neurologi | 4.500.000 | Payment Type : Cash Status : Payment Document Uploaded | |

Anda dapat memeriksa daftar pemesanand engan menekan “List Order”

Kemudian klik tombol “detail “ untuk melanjutkan pembayaran tipe pembayaran yang dipilih

Invoice

| | | | |
|-----------------------|------------------------------|-----------------------|---------------------------|
| No Transaction | 9 | No Invoice | CNE231230132614208 |
| Invoice To | RSUD Dr. Soetomo (neurologi) | | |
| Payment Method | Group Payment | Payment Status | Payment Document Uploaded |

| # | Participant | Package | Price | |
|---------------------------------------------|-----------------------------------------------|-------------------|-----------|-----------|
| Petunjuk pembayaran dapat Anda lihat disini | | | | |
| | | E-Course Epilepsy | 750.000 | |
| 2 | pesertaCNE2022@gmail.co Contoh peserta CNE | Workshop Pain | 4.000.000 | |
| | | | Total | 4.750.000 |

Payment instruction

1. Transfer payment into following account :
PERDOSSI CABANG SURABAYA
Bank Jatim Cabang Dr. Soetomo Surabaya
Account Number : 0322917058
2. Take a photo of the "Proof of Transfer"
3. Upload photo into form "Upload Payment Document"
4. Inform administration to verify Payment Payment Verification could take up to 3 working days.

Upload Payment Document

Photo of Payment(jpeg,png,jpg,gif)

[Download](#)

No file chosen

[+ New Order](#)

[Print](#)

[List Transaction](#)

Invoice

| | | | |
|-----------------------|------------------------------|-----------------------|---------------------------|
| No Transaction | 9 | No Invoice | CNE231230132614208 |
| Invoice To | RSUD Dr. Soetomo (neurologi) | | |
| Payment Method | Group Payment | Payment Status | Payment Document Uploaded |

| # | Participant | Package | Price |
|-------|------------------------------------------------|-------------------|-----------|
| 1 | pesertaCNE2022@gmail.com Contoh peserta CNE | E-Course Epilepsy | 750.000 |
| 2 | pesertaCNE2022@gmail.com Contoh peserta CNE | | 4.000.000 |
| Total | | | 4.750.000 |

Jika sudah melakukan pembayaran, unggah bukti pembayaran

Payment instruction

1. Transfer payment into following account :
PERDOSSI CABANG SURABAYA
Bank Jatim Cabang Dr. Soetomo Surabaya
Account Number : 0322917058
2. Take a photo of the "Proof of Transfer"
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Upload Payment Document

Photo Payment(jpeg,png,jpg,gif)

[Download](#)

no file chosen

Invoice

No Transaction

9

No Invoice

CNE231230132614208

Invoice To

RSUD Dr. Soetomo (neurologi)

Payment Method

Group Payment

Payment Status

Payment Document Uploaded

| # | Participant | Package | Price |
|-------|------------------------------------------------|-------------------|-----------|
| 1 | pesertaCNE2022@gmail.com Contoh peserta CNE | E-Course Epilepsy | 750.000 |
| 2 | pesertaCNE2022@gmail.com Contoh peserta CNE | Workshop Pain | 4.000.000 |
| Total | | | 4.750.000 |

Payment instruction

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4. Inform administration to verify Payment Payment Ver

Upload Payment Document

Photo of Payment(jpeg,png,jpg,gif)

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Choose File No file chosen

Upload

New Order

Hubungi Contact Person untuk verifikasi
pembayaran **Hot Line CNE +62 812-3361-3388**

List Transaction



PIN PERDOSNI 2024 SURABAYA

Hotel JW. Marriott Surabaya, 30 Mei – 2 Juni 2024