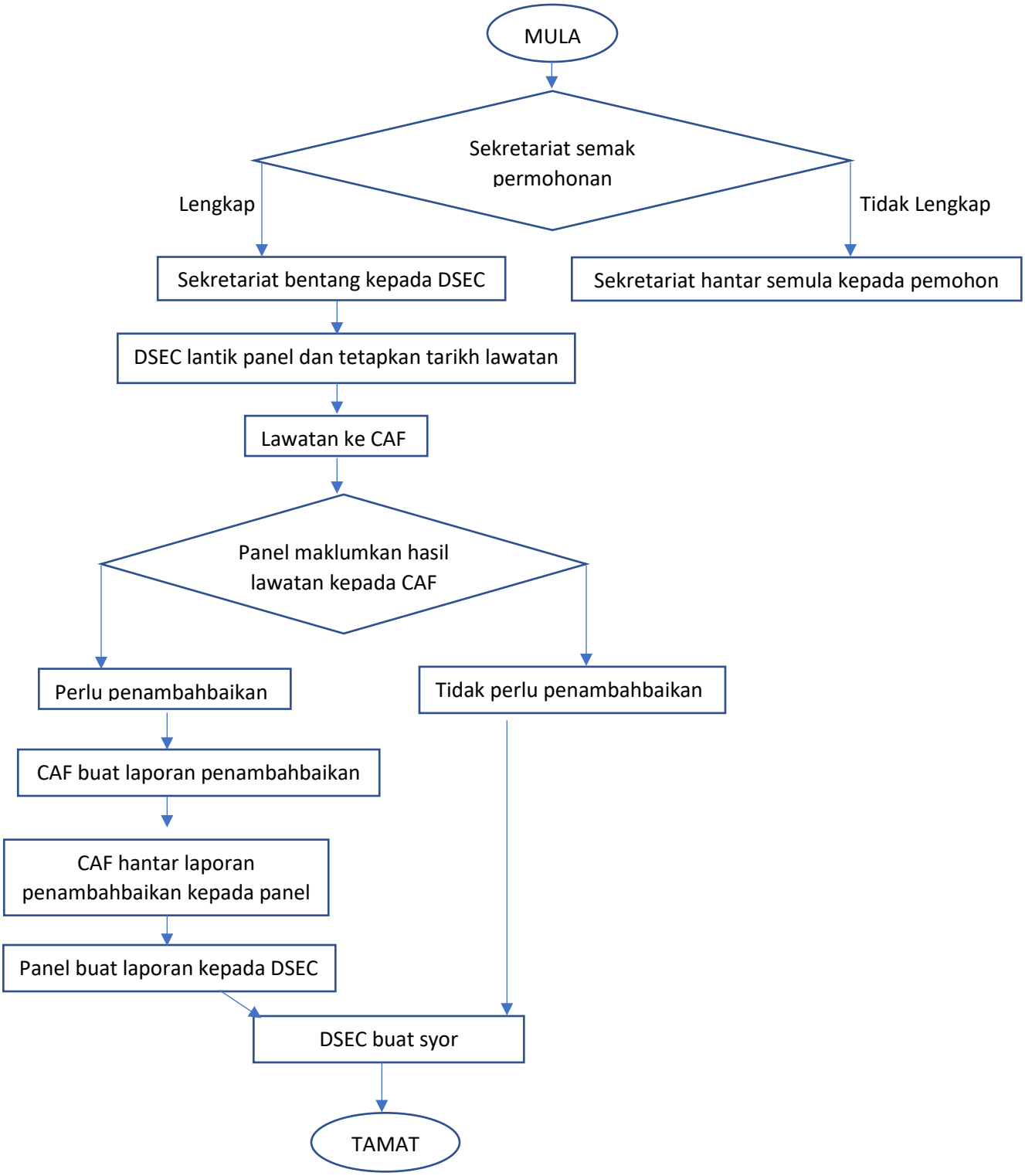CARTA ALIR
PENGURUSAN PERMOHONAN CLINICAL ATTACHMENT FACILITY (CAF)