

## Dr. Amr Gafar

24 Ali Amin, Nasr City,, 5th floor, Cairo, Egypt-

# **INVOICE**

Bill To

## **Haidy Sherif**

01272008836@AMRGAFAR.COM 01272008836 Invoice Date
Due Date
Due Amount
Payment Method
Status

INV-01176 25-10-2022 25-10-2022 £500.00 Cash payment Paid

Item & description	Qty	Unit Cost	Tax	Price
SESSION PACKAGE 1000 PULSES FOR 500 L.E	1	£500		£500.00

Sub Total	£500.00	
Tax	£0.00	
Discount	£0.00	
Paid	£	
Total	£500.00	

#### **Customer Note**

It's great to work with you.

### **Terms & Conditions**

Please pay us your amount in 15 days. Otherwise 12% interest will be applied.  $\,$