

## Dr. Amr Gafar

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

# **INVOICE**

Bill To

## Rasha Abd eldayem

01000679347@amrgafar.com 01000679347

INV-01295 Invoice Date 03-11-2022 Due Date 03-11-2022 £450.00 Due Amount Payment Method Cash payment Status

Paid

| Item & description Qty | y Ur | nit Cost | Гах | Price   |
|------------------------|------|----------|-----|---------|
| session 1              | £4   | 450      |     | £450.00 |

| Sub Total | £450.00 |
|-----------|---------|
| Tax       | £0.00   |
| Discount  | £0.00   |
| Paid      | £       |
| Total     | £450.00 |

### **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.