

## Dr. Amr Gafar

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

# **INVOICE**

Bill To

## **Yasmine Samir Seif**

yasmeensameer94@gmail.com 01060720025 Invoice Date
Due Date
Due Amount
Payment Method
Status

INV-05481 16-03-2024 16-03-2024 £200.00 Cash payment Paid

| Item & description      | Qty | Unit Cost | Tax | Price   |
|-------------------------|-----|-----------|-----|---------|
| session<br>extra pulses | 1   | £200      |     | £200.00 |

| Sub Total | £200.00 |  |
|-----------|---------|--|
| Tax       | £0.00   |  |
| Discount  | £0.00   |  |
| Paid      | £       |  |
| Total     | £200.00 |  |

### **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.  $\,$