

## Dr. Amr Gafar

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

# **INVOICE**

Bill To

## **Nour Rizk Eissa**

01001636165@amrgafar.com 01001636165 Invoice Date
Due Date
Due Amount
Payment Method
Status

INV-06517 10-08-2024 10-08-2024 £1000.00 Cash payment Paid

Item & description	Qty	Unit Cost	Tax	Price
session full body ????? ???? 1000 ????? ????	1	£1000		£1000.00

Sub Total	£1000.00
Tax	£0.00
Discount	£0.00
Paid	£
Total	£1000.00

### **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.