

## Dr. Amr Gafar

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

## **INVOICE**

Bill To

??? ???? ????

01015331197@amrgafar.com 01015331197 Invoice Date
Due Date
Due Amount
Payment Method
Status

INV-07386 30-11-2024 30-11-2024 £1000.00 Cash payment Paid

Item & description	Qty	Unit Cost	Tax	Price
session ???? ????? ????	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.  $\,$