



## Dr. Amr Gafar

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

# INVOICE

Bill To  
**rehab hassan**  
01500091894@amrgafar.com  
01500091894

|                |              |
|----------------|--------------|
| #              | INV-12546    |
| Invoice Date   | 27-08-2026   |
| Due Date       | 27-08-2026   |
| Due Amount     | £3500.00     |
| Payment Method | Cash payment |
| Status         | Paid         |

| Item & description | Qty | Unit Cost | Tax | Price    |
|--------------------|-----|-----------|-----|----------|
| session            | 1   | £3500     |     | £3500.00 |

|              |                 |
|--------------|-----------------|
| Sub Total    | £3500.00        |
| Tax          | £0.00           |
| Discount     | £0.00           |
| Paid         | £               |
| <b>Total</b> | <b>£3500.00</b> |

**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.