



**Dr. Amr Gafar**

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

**INVOICE**

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

|                |              |
|----------------|--------------|
| #              | INV-12559    |
| Invoice Date   | 27-08-2026   |
| Due Date       | 27-08-2026   |
| Due Amount     | £300.00      |
| Payment Method | Cash payment |
| Status         | Paid         |

| Item & description | Qty | Unit Cost | Tax | Price   |
|--------------------|-----|-----------|-----|---------|
| ?????? 3           | 1   | £300      |     | £300.00 |

|           |                |
|-----------|----------------|
| Sub Total | <b>£300.00</b> |
| Tax       | <b>£0.00</b>   |
| Discount  | <b>£0.00</b>   |
| Paid      | <b>£</b>       |

|              |                |
|--------------|----------------|
| <b>Total</b> | <b>£300.00</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.