

# Invoice

Status: **Valid**

Submission Date : 01/05/2023 01:39:10 AM (30/04/2023 10:39:10 PM UTC)

Issuance Date : 01/05/2023 01:37:26 AM Cairo (30/04/2023 10:37:26 PM UTC)

For more details, please  
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## Issuer (From)

مستشفى لايف انترناشيونال

Registration Number #447597124

برج الشرطة القبلي طريق سوهاج نجح حمادي, 1 , ,

Sohag, EG,

Taxpayer Activity Code:

8610



ID: VGVFVAWMMC4NE2VRAZR35AZG10

Proforma Invoice Number:

PO Reference:

SO Reference:

## Recipients (To)

شركة جلوب ميد مصر ... / وناق للتامين الكامل... ..

Registration Number #271997729

المعادي, 75 شارع 15 , ,

الجيزة, EG,

Code Name	Item Code	Description	Qty.	Unit Price (EGP)	Total Sales Amount (EGP)
Insurance Claim	EG-447597124-INSURANCECLAIM	مطالبة تعاقبات لشهر 4	1.0000	10,027.3700	10,027.3700
				Total Sales (EGP)	10,027.3700
				Total discount (EGP)	0.0000
				Total Items Discount (EGP)	0.0000
				Extra Invoice Discounts (EGP)	0.0000
				<b>Total Amount (EGP)</b>	<b>10,027.3700</b>

Internal ID: CLM-23-00000168

Co-Signed By: مستشفى لايف انترناشيونال الحياة الت

PDF Timestamp: 3/5/23 10:44 AM UTC+02:00

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