

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 01:37:01 AM Cairo (30/04/2023 10:37:01 PM UTC)

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Issuer (From)

مستشفى لايف انترناشيونال

Registration Number #447597124

برج الشرطة القبلي طريق سوهاج نجع حمادي, 1 ,

Sohag, EG,

Taxpayer Activity Code:

8610



ID: 8DE8PCBH8BF1MB7E9ZR35AZG10

Proforma Invoice Number:

PO Reference:

SO Reference:

Recipients (To)

شركة جلوب ميد مصر ... / اروب لتأمينات الممتلكات...

Registration Number #289063779

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 | 426.8000 | 426.8000 |
| Total Sales (EGP) | | | | | 426.8000 |
| Total discount (EGP) | | | | | 0.0000 |
| Total Items Discount (EGP) | | | | | 0.0000 |
| Extra Invoice Discounts (EGP) | | | | | 0.0000 |
| Total Amount (EGP) | | | | | 426.8000 |

Internal ID: CLM-23-00000180

Co-Signed By: مستشفى لايف انترناشيونال الحياة الت

PDF Timestamp: 3/5/23 10:46 AM UTC+02:00

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