

Invoice

Status: **Valid**

Submission Date : 31/12/2022 11:27:28 PM (31/12/2022 09:27:28 PM UTC)

Issuance Date : 31/12/2022 10:54:51 PM Cairo (31/12/2022 08:54:51 PM UTC)

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Issuer (From)

مستشفى لايف انتر ناسيونال

Registration Number #447597124

برج الشرطة القبلي طريق سوهاج نجح حمادي, 1 , ,

Sohag, EG,

Taxpayer Activity Code:

8610



ID: ET24D06TDXH94WERGADFZMNG10

Proforma Invoice Number:

PO Reference:

SO Reference:

Recipients (To)

شركة جلوب ميد مصر ... / جي اي جي للناامين... TaxPayer Name:

Registration Number #200026925

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 12	1.0000	440.0000	440.0000
Total Sales (EGP)					440.0000
Total discount (EGP)					0.0000
Total Items Discount (EGP)					0.0000
Extra Invoice Discounts (EGP)					0.0000
Total Amount (EGP)					440.0000

Internal ID: CLM-22-00000004

Co-Signed By: مستشفى لايف انتر ناسيونال الحياة الت

PDF Timestamp: 22/1/23 10:36 AM UTC+02:00

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