

# RECEIPT



**RECEIPT FOR**  
SHIFAAUNITED FOR MEDICAL DEVICES FACTORY

POBOX:  
Mobile: 966500788681-

**Date of Issue:** 27-1-2024  
**Transaction ID:** 5149751782  
**Company ID:** 1234  
**Membership Category:**

**Type of Payment:** New Registration

**Membership Type:** Category C ( 1,000 Barcodes )

**Payment Method:** Bank Transfer

#	Description	Registration Fee	Yearly Fee	SubTotal
1	Category C ( 1,000 Barcodes )	0	2500	2500
<b>Total</b>				<b>2500</b>

This is a system generated document and does not require any signature and stamp.

For transfer to our bank account	
Name	Federation of Saudi Chambers
Account Number	25350612000200
IBAN NO	SA90 1000 0025 3506 1200 0200
Bank Name	Saudi National Bank - SNB
Bank Swift Code	NCBKSAJE

\*Upon transfer, Please upload a copy of transfer receipt from your account.



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