## **Invoice**

## **Invoice To:**

sara 12 Tanta ebn Elfared sara@email.com

## **Invoice Details:**

Inovice No. 1

Invoice Date: 2023-2-9 Invoice time: 22:47:51

Clinic	Service	Doctor	Cost	Paid
clinic1	service 1	ZOZO	600	600

Sub Total = 600 Tax % = 0.00% Grand Total = 600 Remaning = 0