Netcare Garden City Hospital

I N V O I C E

Invoice ID :

INUMB\_30047Jf

# INVOICE TO:

Gemprint (Pty) Ltd

060 - -846-2306

4406 Pilane Street,Soweto,

Gemprint (Pty) Ltd@gmail.com

PO Number:

'PO No-93642

**PRODUCT**

**UNIT PRICE**

**QTY**

**TOTAL**

Event Photography

228.35

489

218011

# PAYMENT METHOD

SUB-TOTAL TOTAL

4147304.0

218011



Bank Name : Capitec

id Bank : 573038000370

**TOTAL**

**218011**