# Netcare Garden City Hospital

INVOICE

# Invoice Date :

10-Dec-2021

Invoice NO : INUMB\_30047Jf

PO NO : 'PO No-93642

# **Invoice to :**

Gemprint (Pty) Ltd

PRICE

ITEM DESCRIPTION

|  |  |
| --- | --- |
| Event Photography | 228.35 |
| Magazine Design | 228.35 |
| Proposal Design | R70 |
| Brochure Design | R50 |
| Letterhead Design | R20 |
| TOTAL : R218011 | |

## SEND PAYMENT TO CONTACT

Bank No: Bank Name:

## 573038000370

**Capitec**

060 - -846-2306