## **GU Hospital**



## **INVOICE**

Patient Name: Mohamed Ahmed Hassan saber Maged

National ID: 30310011235487

Phone: 01235487774 Email: mm@gmail.com

Unpaid

Due Date: Not Provided

Billing ID: 173 Invoice Date: 2025-05-08

Doctor: Mary Johnson

Appointment Date: 2025-05-11 Appointment Time: 08:15:00

Status: Scheduled

DESCRIPTION	UNIT PRICE	AMOUNT
Hospital Service Fees	\$50.00	\$50.00

Total: \$50.00

Thank you for choosing our services!