

# INVOICE



**BGPO.BM**

Northshore Medical & Aesthetics Center,  
P.O. Box HM1839 Hamilton HMGX,  
Bermuda  
1(441)293-5476  
info@nmac.bm

## Billing Address

Sheri Burgess  
sherib@nmac.bm

,  
,

## Shipping Address

Invoice #	INV-2023-0144
Order No.	ORD-2023-0143
Date	Dec 22, 2023
Amount	\$24.50

Product	Rate	Quantity	Price
Plastic Chair covers	\$24.50	1	\$24.50

Total	\$24.5
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$24.50