

# INVOICE



**BGPO.BM**

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

## Billing Address

Accounts Payable  
Accountspayable@nmac.bm

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,

## Shipping Address

Invoice #	INV-2024-0195
Order No.	ORD-2024-0194
Date	Mar 04, 2024
Amount	\$219.50

Product	Rate	Quantity	Price
Thank You Plastic Bags	\$34.50	6	\$207.00
NMAC Envelopes	\$0.25	50	\$12.50

Total	\$219.5
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$219.50