

# 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-2024-0210
Order No.	ORD-2024-0209
Date	Mar 18, 2024
Amount	\$1658.80

Product	Rate	Quantity	Price
Hair Check Cartridges	\$180.00	7	\$1260.00
Scalpmaster Square Chair Back Cover, Transparent Vinly	\$4.60	3	\$13.80
PLURIAL MESOLINE HAIR 5VIALS X 5ML	\$77.00	5	\$385.00

Total	\$1658.8
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$1658.80