

# INVOICE



**BGPO.BM**

Northshore Medical & Aesthetics Center,  
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Bermuda  
1(441)293-5476  
info@nmac.bm

## Billing Address

Dr Kyjuan Brown  
drbrown@nmac.bm  
4417058080  
7 Northshore Medical Center

## Shipping Address

Invoice #	INV-2024-0215
Order No.	ORD-2024-0214
Date	Mar 21, 2024
Amount	\$1850.00

Product	Rate	Quantity	Price
BOTOX VIAL 100IU (1)	\$185.00	10	\$1850.00

Total	\$1850
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$1850.00