

# INVOICE



**BGPO.BM**

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

## Billing Address

Katherine Dale  
kdale@nmac.bm

,  
, Bermuda

## Shipping Address

Invoice #	INV-2024-0232-2
Order No.	ORD-2024-0231-2
Date	Apr 22, 2024
Amount	\$0.00

Product	Rate	Quantity	Price
Sodium Chloride Irrigation USP 500ml	\$46.00	0	\$0.00

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