

# 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-2024-0260
Order No.	ORD-2024-0259
Date	May 01, 2024
Amount	\$10.15

Product	Rate	Quantity	Price
Dexamethasone 10 MG/ML INJ	\$2.03	5	\$10.15

Total	\$10.15
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$10.15