

INVOICE



BGPO.BM

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

Billing Address

Dahji Grimes
dngrimes1@gmail.com

Shipping Address

Invoice #	INV-2024-0313
Order No.	ORD-2024-0312
Date	Jun 18, 2024
Amount	\$9.95

Product	Rate	Quantity	Price
Triple Antibiotic Ointment	\$9.95	1	\$9.95

Total	\$9.95
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$9.95