

INVOICE



BGPO.BM

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

Billing Address

C. Malit
mmalit@nmac.bm

Shipping Address

Invoice #	INV-2024-0316
Order No.	ORD-2024-0315
Date	Jun 24, 2024
Amount	\$976.90

Product	Rate	Quantity	Price
BOTOX VIAL 100IU (1)	\$185.00	5	\$925.00
Small Gloves - Glovepak	\$19.90	1	\$19.90
diagnostic tab electrodes	\$8.00	4	\$32.00

Total	\$976.9
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$976.90