

# INVOICE



**BGPO.BM**

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

## Billing Address

Cherrece Solomon-Shirley  
Cherrece@nmac.bm  
Devionshire,  
,

## Shipping Address

Invoice #	INV-2024-0347
Order No.	ORD-2024-0346
Date	Jul 23, 2024
Amount	\$157.00

Product	Rate	Quantity	Price
Tongue Depressors	\$5.50	24	\$132.00
Exam Table Paper	\$6.25	4	\$25.00

Total	\$157
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$157.00