

# INVOICE



**BGPO.BM**

Northshore Medical & Aesthetics Center,  
P.O. Box HM1839 Hamilton HMGX,  
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-2024-0380
Order No.	ORD-2024-0379
Date	Sep 11, 2024
Amount	\$37.50

Product	Rate	Quantity	Price
Gauze Sponges 4in x 4in	\$16.00	1	\$16.00
Glade Air Freshener	\$6.50	1	\$6.50
Cavicide Spray 24oz	\$15.00	1	\$15.00

Total	\$37.5
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$37.50