



P.O. Box HM 506, Hamilton HM CX  
Tel: (441) 296 8080  
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ACCOUNT NO.
71328
NORTHSHORE MEDICAL & **ONLINE* AESTHETIC CENTRE 7 NORTHSHORE ROAD DEVONSHIRE DV01 DR KYJUAN BROWN

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TYPE	PAGE
Invoice	1
INVOICE NO.	INVOICE DATE
2358009	14/OCT/2024
ORDER NO.	ORDER DATE
9946410	14/OCT/2024
SALESMAN NO.	CUSTOMER P.O.
100	
House Account	

QUANTITY ORDERED	QUANTITY SHIPPED	UOM	PACK	UPC SUPPL. REF.	DESCRIPTION	BGA ITEM NUMBER	LIST PRICE	DISCOUNT GIVEN	NET PRICE	EXTENDED AMOUNT	SUGGESTED RETAIL
1.00	1.00	BX	6		KENALOG 40MG/ML INJ	6x5ml 02101264	330.00		330.00	330.00	
<div>Carter Beal</div>											
Total Ord	Total Shp	Delivered by			CUSTOMER SIGNATURE	Terms	Total Discount				
1.00	1.00				Cash On Delivery						
Accounts past due 30 days will be charged 1.5% per month											
PAY THIS AMOUNT BY: 14/OCT/2024 >											
BNTB Acct # 20-006-060-658478-100											
											330.00