

INVOICE



BGPO.BM

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

Billing Address

Accounts Payable
Accountspayable@nmac.bm

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Shipping Address

Invoice #	INV-2025-0509
Order No.	ORD-2025-0508
Date	Mar 14, 2025
Amount	\$39.00

Product	Rate	Quantity	Price
Tissue 85 sheets	\$2.50	4	\$10.00
Jumbo Paper clips	\$4.50	2	\$9.00
Credit Card Rolls	\$1.00	20	\$20.00

Total	\$39
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$39.00