

INVOICE (BACK ORDER)



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

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Shipping Address

Invoice #	INV-2025-0611
Order No.	ORD-2025-0610
Date	Apr 30, 2025
Amount	\$2150.00

Product	Rate	Quantity	Price
BOTOX VIAL 100IU (1)	\$215.00	10	\$2150.00

Total	\$2150
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$2150.00