

INVOICE



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-2025-0629
Order No.	ORD-2025-0628
Date	May 05, 2025
Amount	\$38.84

Product	Rate	Quantity	Price
Drape Sheets 40" X 60" 2ply (10pc)	\$9.70	4	\$38.80

Total	\$38.8
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$38.84