

# INVOICE



**BGPO.BM**

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

## Billing Address

Dr Amani Flood  
amaniflood@nmac.bm

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,

## Shipping Address

Invoice #	INV-2025-0635
Order No.	ORD-2025-0634
Date	May 07, 2025
Amount	\$155.16

Product	Rate	Quantity	Price
Disposbale Speculum Colon Kit	\$7.75	20	\$155.00

Total	\$155
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$155.16