

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

Sheri Burgess
sherib@nmac.bm

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Shipping Address

Invoice #	INV-2025-0708
Order No.	ORD-2025-0706
Date	Jun 18, 2025
Amount	\$15.82

Product	Rate	Quantity	Price
Kolor Killer Wipes	\$15.80	1	\$15.80

Total	\$15.8
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$15.82