

INVOICE



BGPO.BM

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

Billing Address

Dr Paula Estwick
pestwick@nmac.bm

,
,

Shipping Address

Invoice #	INV-2025-0751
Order No.	ORD-2025-0750
Date	Jul 24, 2025
Amount	\$27.80

Product	Rate	Quantity	Price
Caviwipes XL 9 x 12 65 Pack (12per case)	\$14.10	1	\$14.10
Cavicide Spray 24oz	\$13.67	1	\$13.67

Total	\$27.77
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$27.80