

INVOICE



BGPO.BM

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

Billing Address

Sunny Spa Dept

,
,

Shipping Address

Invoice #	INV-2025-0884
Order No.	ORD-2025-0883
Date	Oct 16, 2025
Amount	\$41.69

Product	Rate	Quantity	Price
CaviWipes (12 per case) (Wipe Size 6 x 6.75)	\$14.08	2	\$28.16
Highlighters	\$0.85	2	\$1.70
Pens pack of 10	\$2.10	1	\$2.10
Post-it Notes 4x6 LINED	\$3.00	1	\$3.00
Post-it Notes 1 3/8 x 1 7/8	\$1.87	2	\$3.74
POST-IT NOTES 3x5	\$2.95	1	\$2.95

Total	\$41.65
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$41.69