

INVOICE



BGPO.BM

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

Billing Address

Dr Kyjuan Brown
drbrown@nmac.bm
4417058080
7 Northshore Medical Center

Shipping Address

Invoice #	INV-2025-0909
Order No.	ORD-2025-0908
Date	Nov 03, 2025
Amount	\$1147.95

Product	Rate	Quantity	Price
BD Allergy Syringe Tray 1ml 26G x 1/2 Testing Intradermal Bevel	\$32.40	26	\$842.40
DermaRite StayStrips Wound Closure Strips, 1/2"X4"	\$33.00	2	\$66.00
Sharps Container 5 QT/4.8L	\$9.00	14	\$126.00
Cotton Tipped Wood Applicators 6in 100pk	\$9.50	8	\$76.00
BD Spinal Needles 22G x 7.00IN	\$5.20	7	\$36.40

Total	\$1146.8
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$1147.95