

INVOICE



BGPO.BM

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Billing Address

Dr Kyjuan Brown
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7 Northshore Medical Center

Shipping Address

Invoice #	INV-2025-0943
Order No.	ORD-2025-0942
Date	Nov 18, 2025
Amount	\$6.51

Product	Rate	Quantity	Price
Glade Air Freshener	\$6.50	1	\$6.50

Total	\$6.5
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$6.51