

INVOICE



BGPO.BM

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

Billing Address

NMAC Medical
admin@example.com

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,

Shipping Address

Invoice #	INV-2025-0967
Order No.	ORD-2025-0966
Date	Dec 05, 2025
Amount	\$20.02

Product	Rate	Quantity	Price
3M TRANSPORE SURGICAL TAPE 1 in x 10yd 12pk	\$20.00	1	\$20.00

Total	\$20
Shipping Charge	\$0.00
Discount	\$0
Sub Total	\$20.02