



# Invoice

Intelligent Light Therapy

**From:**

LS Pro Systems  
Suite 5A-1204  
123 Somewhere Street  
Your City AZ 12345  
support@lsprosystems.com

|                  |                   |
|------------------|-------------------|
| Invoice Number   | INV-0007          |
| Order Number     | 5167              |
| Invoice Date     | December 27, 2019 |
| <b>Total Due</b> | <b>\$2,300.00</b> |

**To:**

Darrell Monroe  
dlynmonr@yahoo.com

| Hrs/Qty | Service                  | Rate/Price | Sub Total  |
|---------|--------------------------|------------|------------|
| 1       | Head Cap                 | \$950.00   | \$950.00   |
| 1       | LS XP1 Port Rechargeable | \$1,350.00 | \$1,350.00 |

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Payment is due within 30 days from date of invoice.

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