LS PRO SYSTEMS

Intelligent Light Therapy

# Invoice

| | |
|---|---|
| Invoice Number | INV-0020 |
| Order Number | 5317 |
| Invoice Date | April 28, 2020 |
| **Total Due** | **$1,100.00** |

**From:**

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

**To:**

| Hrs/Qty | Service | Rate/Price | Sub Total |
|---|---|---|---|
| 1 | LS XP1 Port Rechargeable | $950.00 | $950.00 |
| 1 | Face Pad | $150.00 | $150.00 |

Payment is due within 30 days from date of invoice.

Thanks for choosing LS Pro Systems | support@lsprosystems.com