



Intelligent Light Therapy

# Invoice

**From:**

LS Pro Systems

Suite 5A-1204

123 Somewhere Street

Your City AZ 12345

support@lsprosystems.com

|                  |                   |
|------------------|-------------------|
| Invoice Number   | INV-0021          |
| Invoice Date     | May 16, 2020      |
| <b>Total Due</b> | <b>\$2,060.00</b> |

**To:**

drratansi@gmail.com

Test Quote for Zayd - Final invoice

| Hrs/Qty | Service | Rate/Price | Adjust | Sub Total  |
|---------|---------|------------|--------|------------|
| 1       | xp3     | \$1,100.00 | 0%     | \$1,100.00 |
| 1       | 264 Red | \$900.00   | 0.00%  | \$900.00   |

|                  |                   |
|------------------|-------------------|
| Sub Total        | \$2,000.00        |
| Tax              | \$160.00          |
| Discount         | -\$100.00         |
| <b>Total Due</b> | <b>\$2,060.00</b> |

Payment is due within 30 days from date of invoice.