



Intelligent Light Therapy

# Invoice

**From:**

LS Pro Systems

Suite 5A-1204

123 Somewhere Street

Your City AZ 12345

support@lsprosystems.com

Invoice Number	INV-0019
Order Number	5313
Invoice Date	April 28, 2020
<b>Total Due</b>	<b>\$100.00</b>

**To:**

Hrs/Qty	Service	Rate/Price	Sub Total
1	Face Pad	\$100.00	\$100.00

---

Payment is due within 30 days from date of invoice.

---