

PRO FORMA INVOICE

January 12, 2015

To: Shelley Andersen
Clinical Coordinator
Fresh Start
2011 Palomar Airport Road, #206
Carlsbad, CA 92011

1 Like new, June 2009 Palomar Starlux 300 laser system

S/N: 15-2502

Total system shots for the base laser: 2986

Individual handpiece shots are as follows:

Lux G	1153	S/N: 100796-3
Lux RS	3064	S/N: 135058
Lux Y	2986	S/N: 088548-5

\$18,500.00 delivered

including shipping and CargoCover.com insurance

Sold by Brad Collins – Laser Locator/Broker and Sales Facilitator
320 Wildermere Road
West Palm Beach, FL 33401-7332
561-827-9864

Bank of America Wiring Instructions:

Account Name: Brad Collins

Bank of America Account #: 005567964040

Branch Address: 7281 Lake Worth Road, Lake Worth, FL 33467

Bank of America ABA Routing # (for US Domestic wires): 026009593

Account Name: FRESH START SURGICAL GIFTS		Street Address: 2011 PALOMAR AIRPORT RD STE 206		
City: CARLSBAD	State: CA	Zip: 92011-1432	Country: USA	Day: 760-
Primary ID Type: Driver's License	ID Issuer: CA	ID Number: c1368422	ID Issue Date: 02/02/2010	ID Ex: 03/2
Secondary ID Type:	ID Issuer:	ID Number:	ID Issue Date:	ID Ex:
Comments:				

Wire Transfer Information

Request Date: 01/22/2015	Request time: 04:16:00PM Eastern time	Effective date: 01/22/2015	Wire Type: Domestic
Debit Account #: 8136	Debit Account Type: PLAT BUS CHECKING	Available balance:	Wire Amount (US d \$18,500.00
Qualifying Account #	Qualifying Account Type:	Source of funds: Checking	Wire Fee: \$0.00
Currency type to be sent: US Dollars	Exchange rate N/A	Foreign currency amount: N/A	Amount to Collect () \$18,500.00
FX Contract Number:			

Recipient Account Information

Account Name: Brad Collins			
Street Address:		Account Number: 005567964040	
		City:	State: Zip:
Text to Recipient: Pro Forma Invoice Payment			

Receiving Bank Information

Bank Name: Bank of America, National Association			
Street Address: 100 N TRYON ST, STE 170		Bank ABA/SWIFT Code: 026009593	
		City: CHARLOTTE	State: Zip: NC 28202
Intermediary Bank Name:			
Street Address:		Intermediary Bank ABA:	
		City:	State: Zip:
Text to Receiving Bank:			

