

**Invoice**

1-800-266-0613 Fax: 1-800-266-5044

ACCOUNT NO:	INVOICE DATE:	INVOICE NO:
6999	10/25/2023	6742372-12-01

Federal Tax I.D. No. 44-0657294 Professional Photocopier ID #: 551

Terms: Cash Only

Bill To: Sophie LaFranchi, Esq.  
Manning & Kass  
801 South Figueroa, 15th Floor  
Los Angeles, CA 90017

Ship To: Sophie LaFranchi, Esq.  
Manning & Kass  
801 South Figueroa, 15th Floor,  
Los Angeles, CA 90017

<b>PERTAINING TO:</b> Da'John Brown	<b>FIRMS NUMBER:</b> 7858-70085
<b>CASE TITLE:</b> Da'John Brown / Neutron Holdings, Inc.	<b>INSURED:</b>
<b>CASE NUMBER:</b> 22STCV32096	<b>DATE OF LOSS:</b> 10/2/2021
	<b>CLAIM/ POLICY#:</b> /

DESCRIPTION OF SERVICES RENDERED	QUANTITY	UNIT PRICE	AMOUNT
<b>California Hospital Medical Center/Business Office Los Angeles, CA</b>			
Bates Numbering - per Page	4.00	0.05	.20
Pages	4.00	0.18	.72
Fee Advance Charge - per payment	1.00	5.00	5.00
Notice to Consumer			5.00
Subpoena Preparation			12.50
Witness Fee			15.00
Basic Fee - Subpoena			37.00
Trip Charge	2.00	15.00	30.00
Regarding: Da'John Brown at California Hospital Medical Center/Business Office Los Angeles		<b>SUB-TOTAL</b>	105.42
Please find the attached billing records. kpf		<b>SALES TAX</b>	.56
Thank you for choosing ABI Document Support Services! For billing inquiries, please contact our Client Service Department at 1-800-266-0613.		<b>TOTAL DUE</b>	105.98

FOR PROPER CREDIT, PLEASE DETACH THIS PORTION AND RETURN WITH YOUR PAYMENT.

PLEASE CHECK HERE ( )  
AND MAKE CHANGES TO  
ADDRESS BELOW.

**Remittance Copy**

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Los Angeles, CA 90017

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**TOTAL DUE: \$ 105.98**

1. PLEASE INCLUDE INVOICE NUMBER ON PAYMENT.
2. MAKE CHECKS PAYABLE TO ABI Document Support Services.

Remit To: **ABI Document Support Services**  
P.O. Box 2970  
Springfield, MO 65801-2970



Order # 6742372-12-01/ABlinvRE.MDX