

## **RECEIPT OF PAYMENT**

| Receipt Number:          | 2025100838   |
|--------------------------|--|
| Receipt Date:            | 09/03/2025   |
| Date Paid:               | 09/03/2025   |
| Payment Method:          | Credit Card,   |
| Check Number:            | ,  |
| Transaction Information: |  |
| Full Amount:             | \$50.00  |
| Amount Tendered          | \$50.00  |
| Paid By:                 | MASSAGE HEIGHTS/RONOMI LLC, Address:318 E. 68TH ST.,<br>Phone:(816) 572-7416 |

## Fees:

| Fee Description  | Reference / Application | Amount Paid |
|------------------|-------------------------|-------------|
|                  | Number                  |             |
| Business License | LC81250656              | \$50.00     |
|                  |                         |             |