

## **RECEIPT OF PAYMENT**

Receipt Number:	2019046709
Receipt Date:	11/19/2019
Date Paid:	11/19/2019
Payment Method:	Check,
Check Number:	1161,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	PHO LA LA, Address:44 NE SYCAMORE ST, Phone:(816) 699-4685

## Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC900170793	\$50.00