



### RECEIPT OF PAYMENT

Receipt Number:	2020050247
Receipt Date:	06/11/2020
Date Paid:	06/11/2020
Payment Method:	Credit Card,
Check Number:	,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	SMOKE TOKZ, Address:1129 NE RICE RD, Phone:(916) 230-7643

### **Fees:**

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC700200379	\$50.00