

## **RECEIPT OF PAYMENT**

Receipt Number:	2020050345
Receipt Date:	06/17/2020
Date Paid:	06/17/2020
Payment Method:	Check,
Check Number:	1153,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	B-ENVIED SALON/LATASHA COCHRAN, Address:11533 E 74TH ST CT, Phone:(816) 600-5269

## Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800180136	\$50.00