

## **RECEIPT OF PAYMENT**

Receipt Number:	2020051604	
Receipt Date:	07/13/2020	
Date Paid:	07/13/2020	
Payment Method:	Check,	
Check Number:	2679,	
Full Amount:	\$50.00	
Amount Tendered	\$50.00	
Paid By:	ABSOLUTE SALON/KATHLEEN YOUNG, Address:801 SW BENJAMIN DR, Phone:(816) 246-7467	

## Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800170507	\$50.00