

## **RECEIPT OF PAYMENT**

Receipt Number:	2020052341
Receipt Date:	08/12/2020
Date Paid:	08/12/2020
Payment Method:	Credit Card,
Check Number:	,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	CITY GIRLS BEAUTY SALON/R JONES /ICE INTERNATIONAL SALON, Address:311 NW ROCKWOOD CT, Phone:(816) 668-7903

## Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800160091	\$50.00