

## **RECEIPT OF PAYMENT**

Receipt Number:	2020052728	
Receipt Date:	08/21/2020	
Date Paid:	08/21/2020	
Payment Method:	Check,	
Check Number:	3494,	
Full Amount:	\$50.00	
Amount Tendered	\$50.00	
Paid By:	MEINEKE CAR CARE CENTER, Address:1712 S 22ND ST, Phone:(816) 525-8403	

## Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800142918	\$50.00