

RECEIPT OF PAYMENT

Receipt Number:	2020053615
Receipt Date:	09/22/2020
Date Paid:	09/22/2020
Payment Method:	Credit Card,
Check Number:	,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	MASSAGE HEIGHTS/CAMELITA MUHAMMAD, Address:3323CLEVELAND AVE, Phone:(816) 554-3438

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC1100200681	\$50.00