

## **RECEIPT OF PAYMENT**

| Receipt Number: | 2020053791                                                                   |
|-----------------|------------------------------------------------------------------------------|
| Receipt Date:   | 09/29/2020                                                                   |
| Date Paid:      | 09/29/2020                                                                   |
| Payment Method: | Credit Card,                                                                 |
| Check Number:   | ,                                                                            |
| Full Amount:    | \$50.00                                                                      |
| Amount Tendered | \$50.00                                                                      |
| Paid By:        | MASSAGE HEIGHTS/RACHEL MCKENZIE, Address:128 NW 191 RD, Phone:(816) 554-3438 |

## Fees:

| Fee Description          | Reference / Application<br>Number | Amount Paid |
|--------------------------|-----------------------------------|-------------|
| 9110058-Business License | LC1100190496                      | \$50.00     |
|                          |                                   |             |