

## **RECEIPT OF PAYMENT**

Receipt Number:	2021056180
Receipt Date:	02/11/2021
Date Paid:	02/11/2021
Payment Method:	Check,
Check Number:	1393,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	AMAZING LASH STUDIO, Address:4152 W 128TH TR, Phone:(816) 674-5197

## Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC700170174	\$50.00