

RECEIPT OF PAYMENT

Receipt Number:	2021056378
Receipt Date:	02/23/2021
Date Paid:	02/23/2021
Payment Method:	Credit Card,
Check Number:	,
Full Amount:	\$115.00
Amount Tendered	\$115.00
Paid By:	LOVELL INSURANCE GROUP, Address:350 SW LONGVIEW BLVD, Phone:(816) 800-2250

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC52170768	\$50.00
9110052-Business License Penalty Fee	LC52170768	\$12.50
9110058-Business License	LC52170768	\$50.00
9110052-Business License Penalty Fee	LC52170768	\$2.50