

## **RECEIPT OF PAYMENT**

Receipt Number:	2021059508
Receipt Date:	06/04/2021
Date Paid:	06/04/2021
Payment Method:	Check,
Check Number:	5061114,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	CVS PHARMACY #5719, Address:1 CVS DR MC1160, Phone:(816) 524-5084

## Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC44141787	\$50.00