

RECEIPT OF PAYMENT

Receipt Number:	2021060604
Receipt Date:	06/28/2021
Date Paid:	06/28/2021
Payment Method:	Check,
Check Number:	1064,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	SALON RITZ, Address:203 SW JEFFERSON ST, Phone:(816) 525-4909

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC81143511	\$50.00