

## **RECEIPT OF PAYMENT**

| Receipt Number: | 2021062989  |
|-----------------|---|
| Receipt Date:   | 09/21/2021  |
| Date Paid:      | 09/21/2021  |
| Payment Method: | Check,  |
| Check Number:   | 1020,   |
| Full Amount:    | \$50.00   |
| Amount Tendered | \$50.00   |
| Paid By:        | HALO SALON KC LLC, Address:3680 NE AKIN DR, Unit 102,<br>Phone:(816) 853-2520 |

## Fees:

| Fee Description          | Reference / Application<br>Number | Amount Paid |
|--------------------------|-----------------------------------|-------------|
| 9110058-Business License | LC81190512                        | \$50.00     |
|                          |                                   |             |