

## **RECEIPT OF PAYMENT**

Receipt Number:	2022065956	
Receipt Date:	02/16/2022	
Date Paid:	02/16/2022	
Payment Method:	Check,	
Check Number:	1135,	
Full Amount:	\$50.00	
Amount Tendered	\$50.00	
Paid By:	80 LUXE SALON SPA MED, Address:38 T ST, Phone:(816) 916-4550	

## Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC81200004	\$50.00