

RECEIPT OF PAYMENT

Receipt Number:	2022068363
Receipt Date:	05/11/2022
Date Paid:	05/11/2022
Payment Method:	Credit Card,
Check Number:	,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	SMOKE TOKZ, Address:1129 NE RICE RD, Phone:(916) 230-7643

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC44200379	\$50.00