

## **RECEIPT OF PAYMENT**

Receipt Number:	2022068593
Receipt Date:	05/16/2022
Date Paid:	05/16/2022
Payment Method:	Credit Card,
Check Number:	,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	HAIR TAILORS/CINDY MELTON, Address:11715 BEACON AVE, Phone:(816) 246-4247

## Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC81142053	\$50.00