

RECEIPT OF PAYMENT

| Receipt Number: | 2022070175 |
|-----------------|--|
| Receipt Date: | 06/23/2022 |
| Date Paid: | 06/23/2022 |
| Payment Method: | Cash, |
| Check Number: | , |
| Full Amount: | \$50.00 |
| Amount Tendered | \$50.00 |
| Paid By: | HEALING HANDS MASSAGE THERAPY LLC, Address:1111 NE NOELEEN CT, Phone:(816) 739-8914 |

Fees:

| Fee Description | Reference / Application Number | Amount Paid |
|--------------------------|-----------------------------------|-------------|
| 9110058-Business License | LC62140496 | \$50.00 |
| | | |