

RECEIPT OF PAYMENT

| Receipt Number: | 2022071491 |
|-----------------|--|
| Receipt Date: | 08/03/2022 |
| Date Paid: | 08/03/2022 |
| Payment Method: | Check, |
| Check Number: | 1036, |
| Full Amount: | \$57.50 |
| Amount Tendered | \$57.50 |
| Paid By: | HEALTH HAVEN THERAPEUTIC MASSAGE, Address:407 W 86TH ST., Phone:(816) 277-5660 |

Fees:

| Fee Description | Reference / Application Number | Amount Paid |
|--------------------------|-----------------------------------|-------------|
| 0110050 Dunings Linears | | ¢50.00 |
| 9110058-Business License | LC62180209 | \$50.00 |
| 9110052-Business License | LC62180209 | \$7.50 |
| Penalty Fee | | |
| | | |