

RECEIPT OF PAYMENT

Receipt Number:	2023077197
Receipt Date:	04/24/2023
Date Paid:	04/24/2023
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	LIGHT SLEEPER, Address:252 NE CHIPMAN RD, Phone:(816) 256-1885

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC81170141	\$50.00