

RECEIPT OF PAYMENT

Receipt Number:	2023078727
Receipt Date:	06/01/2023
Date Paid:	06/01/2023
Payment Method:	Check,
Check Number:	101,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	SUMMIT FAMILIES FIRST, LLC, Address:529 SE 2ND ST, Unit A, Phone:(816) 608-5335

Fees:

Fee Description	Reference / Application	Amount Paid
	Number	
9110058-Business License	LC62230365	\$50.00