

RECEIPT OF PAYMENT

Receipt Number:	2023079102
Receipt Date:	06/12/2023
Date Paid:	06/12/2023
Payment Method:	Cash,
Check Number:	,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	FOXY NAILS & SPA, Address:3680 NE AKIN DR, Unit 116, Phone:(816) 554-4955

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC81141874	\$50.00