

RECEIPT OF PAYMENT

| Receipt Number: | 2023079502 |
|--------------------------|--|
| Receipt Date: | 06/20/2023 |
| Date Paid: | 06/20/2023 |
| Payment Method: | Credit Card, |
| Check Number: | , |
| Transaction Information: | |
| Full Amount: | \$50.00 |
| Amount Tendered | \$50.00 |
| Paid By: | Shandra Mortensen, Address:2321 INDEPENDENCE AVE NE, Phone:(816) 730-6198 |

Fees:

| Fee Description | Reference / Application Number | Amount Paid |
|--------------------------|-----------------------------------|-------------|
| 9110058-Business License | LC23143624 | \$50.00 |
| | | |