

RECEIPT OF PAYMENT

Receipt Number:	2023079897
Receipt Date:	06/29/2023
Date Paid:	06/29/2023
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	MASSAGE HEIGHTS/ROSA BURKHAM, Address:11211 E 49TH ST, Phone:(417) 655-7840

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC62220465	\$50.00