

RECEIPT OF PAYMENT

Receipt Number:	2023081135
Receipt Date:	08/14/2023
Date Paid:	08/14/2023
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	ZEN MASSAGE/KYLE SLAUGHTER, Address:5709 E 102ND ST, Phone:(816) 600-5304

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC62230571	\$50.00