

RECEIPT OF PAYMENT

Receipt Number:	2023081597
Receipt Date:	08/30/2023
Date Paid:	08/30/2023
Payment Method:	Cash,
Check Number:	,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	BLOOM NAILS & SPA LLC, Address:1708 NW CHIPMAN RD, Phone:(816) 554-4729

Fees:

Fee Description	Reference / Application	Amount Paid
	Number	
9110058-Business License	LC81190676	\$50.00