

RECEIPT OF PAYMENT

Receipt Number:	2023081611
Receipt Date:	08/30/2023
Date Paid:	08/30/2023
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$125.00
Amount Tendered	\$125.00
Paid By:	SALON ALLURE/CARLI RAGSDALE, Address:512 W 91ST TERR, Phone:(816) 524-2902

Fees:

Fee Description	Reference / Application	Amount Paid
	Number	
9110058-Business License	LC800170772	\$50.00
9110052-Business License	LC800170772	\$12.50
Penalty Fee		
9110058-Business License	LC800170772	\$50.00
9110052-Business License	LC800170772	\$12.50
Penalty Fee		