

RECEIPT OF PAYMENT

Receipt Number:	2023082118
Receipt Date:	09/22/2023
Date Paid:	09/22/2023
Payment Method:	Cash,
Check Number:	,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	MASSAGE HEIGHTS/BRIANNE HAWKINS, Address:1269 NW PHELPS DR, Phone:(816) 266-2863

Fees:

Fee Description	Reference / Application	Amount Paid
	Number	
9110058-Business License	LC62230652	\$50.00