

RECEIPT OF PAYMENT

Receipt Number:	2023083093
Receipt Date:	11/02/2023
Date Paid:	11/02/2023
Payment Method:	Check,
Check Number:	44626917,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	BARIATRIC & METABOLIC SPECIALISTS, Address:5100 W 110TH ST STE 110, Phone:(913) 345-6960

Fees:

Fee Description	Reference / Application	Amount Paid
	Number	
9110058-Business License	LC62180607	\$50.00