

RECEIPT OF PAYMENT

Receipt Number:	2023083919
Receipt Date:	12/12/2023
Date Paid:	12/12/2023
Payment Method:	Check,
Check Number:	1034,
Transaction Information:	
Full Amount:	\$55.00
Amount Tendered	\$55.00
Paid By:	MIRROR IMAGES/CINDI CLIFFORD, Address:409 N LAKE, Phone:(816) 699-3666

Fees:

Fee Description	Reference / Application	Amount Paid
	Number	
9110058-Business License	LC81150895	\$50.00
9110052-Business License Penalty Fee	LC81150895	\$5.00