

RECEIPT OF PAYMENT

| Receipt Number: | 2024084834 |
|--------------------------|---|
| Receipt Date: | 02/04/2024 |
| Date Paid: | 02/04/2024 |
| Payment Method: | Credit Card, |
| Check Number: | , |
| Transaction Information: | |
| Full Amount: | \$50.00 |
| Amount Tendered | \$50.00 |
| Paid By: | Gina Accurso, Address:3101 ARBOR TREE DR SW, Phone:(816) 694-4661 |

Fees:

| Fee Description | Reference / Application Number | Amount Paid |
|--------------------------|-----------------------------------|-------------|
| 9110058-Business License | LC62240050 | \$50.00 |
| | | |