

## RECEIPT OF PAYMENT

| Receipt Number:          | 2024084891                                                   |
|--------------------------|--------------------------------------------------------------|
| Receipt Date:            | 02/06/2024                                                   |
| Date Paid:               | 02/06/2024                                                   |
| Payment Method:          | Credit Card,                                                 |
| Check Number:            | ,                                                            |
| Transaction Information: |                                                              |
| Full Amount:             | \$50.00                                                      |
| Amount Tendered          | \$50.00                                                      |
| Paid By:                 | Torri Wright, Address:6405 Metcalf Ave, Phone:(913) 236-5300 |

## Fees:

| Fee Description          | Reference / Application<br>Number | Amount Paid |
|--------------------------|-----------------------------------|-------------|
| 9110058-Business License | LC72220149                        | \$50.00     |
|                          |                                   |             |