

## **RECEIPT OF PAYMENT**

Receipt Number:	2024085760
Receipt Date:	03/12/2024
Date Paid:	03/12/2024
Payment Method:	Check,
Check Number:	10245,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	American Hearing and Audiology, Address:6701 WEST 64TH ST STE 125, Phone:(913) 717-4004

## Fees:

Fee Description	Reference / Application	Amount Paid
	Number	
9110058-Business License	LC62220223	\$50.00