

RECEIPT OF PAYMENT

Receipt Number:	2024086061
Receipt Date:	03/22/2024
Date Paid:	03/22/2024
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	MASSAGE HEIGHTS / RYLEE MCKOWN, Address:6551 ROCKHILL RD, Phone:(816) 213-1101

Fees:

Fee Description	Reference / Application	Amount Paid
	Number	
9110058-Business License	LC81240174	\$50.00