

RECEIPT OF PAYMENT

Receipt Number:	2024087236	
Receipt Date:	05/07/2024	
Date Paid:	05/07/2024	
Payment Method:	Check,	
Check Number:	17866,	
Transaction Information:		
Full Amount:	\$50.00	
Amount Tendered	\$50.00	
Paid By:	ETC PHYSICAL THERAPY INC, Address:PO BOX 320, Phone:(816) 347-9696	

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC62141740	\$50.00