



RECEIPT OF PAYMENT

Receipt Number:	2024087909
Receipt Date:	05/20/2024
Date Paid:	05/20/2024
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	SAMANTHA SMITH, Address:7013 W 129th Ter Apt 104, Phone:(913) 426-8866

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC62210372	\$50.00