

## **RECEIPT OF PAYMENT**

Receipt Number:	2024090052
Receipt Date:	07/15/2024
Date Paid:	07/15/2024
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	THE A LIST SALON, Address:400 SW NICHOLS ST , Phone:(816) 554-3907

## Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC81140703	\$50.00