

## **RECEIPT OF PAYMENT**

Receipt Number:	2024090456
Receipt Date:	07/25/2024
Date Paid:	07/25/2024
Payment Method:	Cash,
Check Number:	,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	ZEN MASSAGE AND FACIALS/STEPHANIE LANE, Address:7 NE JOHNSON ST APT 2A

## Fees:

Fee Description	Reference / Application	Amount Paid
	Number	
9110058-Business License	LC62240493	\$50.00