

## RECEIPT OF PAYMENT

Receipt Number:	2024091792
Receipt Date:	09/09/2024
Date Paid:	09/09/2024
Payment Method:	Cash,
Check Number:	,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	SALON RITZ/HAIR BY HILLY, Address:1228 NE COLLEEN DR

## Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC81240624	\$50.00