

RECEIPT OF PAYMENT

Receipt Number:	2025096605
Receipt Date:	04/28/2025
Date Paid:	04/28/2025
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	IMAGE STUDIOS/SS NAILS, Address:500 S ADAMS ST., Phone:(816) 702-9567

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC81250124	\$50.00