

RECEIPT OF PAYMENT

Receipt Number:	2025097649
Receipt Date:	05/21/2025
Date Paid:	05/21/2025
Payment Method:	Check,
Check Number:	51500988,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	CVS PHARMACY #4088, Address:1 CVS DR MC1160, Phone:(816) 966-1455

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC44141783	\$50.00