



RECEIPT OF PAYMENT

Receipt Number:	2025099569
Receipt Date:	07/18/2025
Date Paid:	07/18/2025
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	VISONI SALON/CASEY ENGLEBRAKE, Address:816 W Jack St, Phone:(816) 651-7211

Fees:

Fee Description	Reference / Application Number	Amount Paid
Business License	LC81143494	\$50.00