

# RECEIPT OF PAYMENT

**Receipt Number:** 2019112005  
**Receipt Date:** 12/11/2019  
**Date Paid:** 12/11/2019  
**Full Amount:** \$100.00

<b>Payment Details:</b>	<b>Payment Method</b>	<b>Amount Tendered</b>	<b>Check Number</b>
	Credit Card	\$100.00	
	<b>Name on Credit Card / Confirmation #</b>	5844465	

**Amount Tendered:** \$100.00  
**Change / Overage:** \$0.00  
**Contact:** Andrew Lee, Address:917 Shiloh Ridge Run NW, Phone:(205) 807-9599

## FEE DETAILS:

<b>Fee Description</b>	<b>Reference Number</b>	<b>Amount Owing</b>	<b>Amount Paid</b>
ABL Manager Permit Fee	LC20190000416	\$100.00	\$100.00