

# RECEIPT OF PAYMENT

**Receipt Number:** 2022159914  
**Receipt Date:** 11/14/2022  
**Date Paid:** 11/14/2022  
**Full Amount:** \$150.00

Payment Details:	Payment Method	Amount Tendered	Check Number
	Check	\$100.00	9790

**Name on Credit Card /  
Confirmation #**

**Amount Tendered:** \$100.00  
**Change / Overage:** \$0.00  
**Contact:** B & D RESTAURANTS INC., Address:1105 PARKSIDE LANE, Phone:(770) 928-9494

## FEE DETAILS:

Fee Description	Reference Number	Amount Owing	Amount Paid
ABL Manager Permit Fee	LC1997070474	\$100.00	\$100.00