

# RECEIPT OF PAYMENT

**Receipt Number:** 2022160492  
**Receipt Date:** 11/30/2022  
**Date Paid:** 11/30/2022  
**Full Amount:** \$100.00

Payment Details:	Payment Method	Amount Tendered	Check Number
	Cash	\$70.00	

**Name on Credit Card /  
Confirmation #**

**Amount Tendered:** \$70.00  
**Change / Overage:** \$0.00  
**Contact:** Seung Hwan Lee, Address: 2379 Whispering Dr NW

## FEE DETAILS:

Fee Description	Reference Number	Amount Owing	Amount Paid
ABL Manager Permit Fee	LC20190000416	\$100.00	\$70.00