

# RECEIPT OF PAYMENT

**Receipt Number:** 2019107393  
**Receipt Date:** 07/25/2019  
**Date Paid:** 07/25/2019  
**Full Amount:** \$100.00

| <b>Payment Details:</b> | <b>Payment Method</b> | <b>Amount Tendered</b> | <b>Check Number</b> |
|-------------------------|-----------------------|------------------------|---------------------|
|                         | Credit Card           | \$100.00               | 5381936             |

**Amount Tendered:** \$100.00  
**Change / Overage:** \$0.00  
**Contact:** John Sang Joon Han, Address:3116 Springhill Pkwy, Phone:(678) 907-7814

## 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           |