



**WASHINGTON**  
**Secretary of State**  
Corporations & Charities Division

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## CUSTOMER RECEIPT

### Payment Transaction:

Work Order #: 2024021300118989

Received Date: 02/13/2024

Total Paid: \$70.00

### Payment Details:

Cardholder Name / Payer Name	Payment Type	Identifying Number	Payment Date	Amount
TOM FATA	VISA	9933	02/13/2024	\$ 70.00

### Transaction Details:

Name	UBI # / Registration #	Service Type	Amount	Processing Fee
LABOR LAW POSTER SERVICE, LLC	604 418 409	ANNUAL REPORT	\$ 70.00	\$ 0.00