



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

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|--------------------------|--|
| Receipt Number: | 2025100623 |
| Receipt Date: | 08/26/2025 |
| Date Paid: | 08/26/2025 |
| Payment Method: | Check, |
| Check Number: | 283, |
| Transaction Information: | |
| Full Amount: | \$50.00 |
| Amount Tendered | \$50.00 |
| Paid By: | THE A LIST SALON, Address:400 SW NICHOLS ST , Phone:(816) 554-3907 |

Fees:

| Fee Description | Reference / Application Number | Amount Paid |
|------------------|--------------------------------|-------------|
| Business License | LC81140703 | \$50.00 |
| | | |