

220 SE Green Street | Lee's Summit, MO 64063 | P: 816.969.1000 | cityofls.net

RECEIPT OF PAYMENT

Receipt Number:	2015010967
Receipt Date:	05/12/2015
Date Paid:	05/12/2015
Payment Method:	Check,
Check Number:	1196,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	TLC FAMILY DENTISTRY, Address:3568 SW MARKET ST, Phone:(816) 537-6161

Fees:

Fee Description	Reference / Application Number	Amount Paid
0020-Business License	LC300144123	\$50.00