



LEE'S SUMMIT MISSOURI

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

RECEIPT OF PAYMENT

Receipt Number:	2016022423
Receipt Date:	09/13/2016
Date Paid:	09/13/2016
Payment Method:	Check,
Check Number:	6962,
Full Amount:	\$52.50
Amount Tendered	\$52.50
Paid By:	GILKISON FAMILY CHIROPRACTIC, Address:672 SE BAYBERRY LN, Unit 105, Phone:(816) 554-7246

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC1200140650	\$50.00
9110052-Business License Penalty Fee	LC1200140650	\$2.50