



LEE'S SUMMIT MISSOURI

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

RECEIPT OF PAYMENT

Receipt Number:	2017023809
Receipt Date:	01/04/2017
Date Paid:	01/04/2017
Payment Method:	Check,
Check Number:	9261,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	KANSAS CITY BONE & JOINT CLINIC, Address:10701 NALL AVE STE 200, Phone:(913) 381-5225

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC300150193	\$50.00