

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

RECEIPT OF PAYMENT

Receipt Number:	2017026440
Receipt Date:	05/18/2017
Date Paid:	05/18/2017
Payment Method:	Check,
Check Number:	3294,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	STATE FARM INSURANCE / ROD RICHEY, Address:613 SW 3RD ST, Unit A, Phone:(816) 525-2227

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800144215	\$50.00