

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

RECEIPT OF PAYMENT

Receipt Number:	2017026706
Receipt Date:	05/23/2017
Date Paid:	05/23/2017
Payment Method:	Check,
Check Number:	8397,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	T C WILSON INSURANCE AGENCY INC, Address:327 N RANDOLH, Phone:(816) 525-4255

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800144032	\$50.00