

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

RECEIPT OF PAYMENT

Receipt Number:	2017029064
Receipt Date:	07/27/2017
Date Paid:	07/27/2017
Payment Method:	Check,
Check Number:	201061,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	ADVANCED SURGICAL ASSOCIATES, Address:3460 NE RALPH POWELL RD , Phone:(816) 246-0800

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC300140945	\$50.00