

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

RECEIPT OF PAYMENT

Receipt Number:	2017029445	
Receipt Date:	08/10/2017	
Date Paid:	08/10/2017	
Payment Method:	Check,	
Check Number:	20542,	
Full Amount:	\$50.00	
Amount Tendered	\$50.00	
Paid By:	SAINT LUKES SURGICENTER LEE'S SUMMIT, Address:120 NE SAINT LUKES BLVD, Phone:(816) 347-5822	

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC300143790	\$50.00