

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

RECEIPT OF PAYMENT

Receipt Number:	2017029894
Receipt Date:	08/30/2017
Date Paid:	08/30/2017
Payment Method:	Check,
Check Number:	7001,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	INSURANCE SALES CO, Address:205 SW JEFFERSON ST, Phone:(816) 246-7373

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800142294	\$50.00