



LEE'S SUMMIT MISSOURI

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

RECEIPT OF PAYMENT

Receipt Number:	2017029985
Receipt Date:	09/06/2017
Date Paid:	09/06/2017
Payment Method:	Check,
Check Number:	1397,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	LAKEWOOD CHIROPRACTIC, Address:731 NE LAKEWOOD BLVD, Phone:(816) 373-3373

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC1200140519	\$50.00