

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

RECEIPT OF PAYMENT

Receipt Number:	2017030147
Receipt Date:	09/13/2017
Date Paid:	09/13/2017
Payment Method:	Cash,
Check Number:	,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	MASSAGE HEIGHTS/BRIELLE CLARY , Address:329 N FOX RIDGE DR APT 205, Phone:(816) 554-3438

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License*	LC1100170585	\$50.00