



LEE'S SUMMIT MISSOURI

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

RECEIPT OF PAYMENT

Receipt Number:	2017030765
Receipt Date:	10/25/2017
Date Paid:	10/25/2017
Payment Method:	Check,
Check Number:	1447,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	LEES SUMMIT FAMILY CHIROPRACTIC, Address:618 SW 3RD ST, Unit H, Phone:(816) 287-4044

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC1200142004	\$50.00