

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

RECEIPT OF PAYMENT

Receipt Number:	2018035490
Receipt Date:	06/15/2018
Date Paid:	06/15/2018
Payment Method:	Check,
Check Number:	201371,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	ADVANCED SURGICAL ASSOCIATES, Address:3460 NE RALPH POWELL RD , Phone:(816) 246-0800

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC300140945	\$50.00