

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

RECEIPT OF PAYMENT

Receipt Number:	2018035805	
Receipt Date:	06/26/2018	
Date Paid:	06/26/2018	
Payment Method:	Check,	
Check Number:	5132,	
Full Amount:	\$50.00	
Amount Tendered	\$50.00	
Paid By:	ADVANCED ORTHOPEDICS AND SPORTS MEDICINE, Address:2000 SE BLUE PKWY, Unit 230, Phone:(816) 525-2840	

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC300160543	\$50.00