## LEE'S SUMMIT

## **DEVELOPMENT SERVICES**

## **RECEIPT OF PAYMENT**

| Receipt Number: | 2019043449                                                                                           |  |
|-----------------|------------------------------------------------------------------------------------------------------|--|
| Receipt Date:   | 06/25/2019                                                                                           |  |
| Date Paid:      | 06/25/2019                                                                                           |  |
| Payment Method: | Check,                                                                                               |  |
| Check Number:   | 1482,                                                                                                |  |
| Full Amount:    | \$50.00                                                                                              |  |
| Amount Tendered | \$50.00                                                                                              |  |
| Paid By:        | IN HARMONY THERAPEUTIC MASSAGE LLC, Address:923 NE<br>WOODS CHAPEL RD, STE 152, Phone:(816) 721-3965 |  |

## Fees:

| Fee Description          | Reference / Application<br>Number | Amount Paid |
|--------------------------|-----------------------------------|-------------|
| 9110058-Business License | LC1200140510                      | \$50.00     |
|                          |                                   |             |