



**LEE'S SUMMIT**  
MISSOURI

RECEIPT OF PAYMENT

|                 |  |
|-----------------|--|
| Receipt Number: | 2020049490   |
| Receipt Date:   | 05/20/2020   |
| Date Paid:      | 05/20/2020   |
| Payment Method: | Cash,  |
| Check Number:   | ,  |
| Full Amount:    | \$50.00  |
| Amount Tendered | \$50.00  |
| Paid By:        | MASSAGE HEIGHTS/ERIKA CHASE, Address:13141 ASHLAND AVE, Phone:(816) 554-3438 |

**Fees:**

| Fee Description          | Reference / Application Number | Amount Paid |
|--------------------------|--------------------------------|-------------|
| 9110058-Business License | LC1100170409                   | \$50.00     |
|                          |                                |             |