



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2020050165
Receipt Date:	06/11/2020
Date Paid:	06/11/2020
Payment Method:	Check,
Check Number:	11880,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	TWIN LAKES INSURANCE AGENCY, Address:2641 NE MCBAINE DR, Phone:(816) 525-2125

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800144315	\$50.00