



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2020050749
Receipt Date:	06/24/2020
Date Paid:	06/24/2020
Payment Method:	Check,
Check Number:	12809,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	SALON DE CRIST, Address:905 SE LANGSFORD RD, Unit E, Phone:(816) 525-9331

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800143484	\$50.00