



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2020052037
Receipt Date:	07/29/2020
Date Paid:	07/29/2020
Payment Method:	Check,
Check Number:	11060,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	PAULSON INSURANCE AGENCY INC, Address:PO BOX 639, Phone:(816) 525-9927

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800143305	\$50.00