



**LEE'S SUMMIT**  
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2020053170
Receipt Date:	09/03/2020
Date Paid:	09/03/2020
Payment Method:	Check,
Check Number:	vv135,
Full Amount:	\$55.00
Amount Tendered	\$55.00
Paid By:	JOANNA HURD DDS PC, Address:410D SE 3RD ST, Unit 102A, Phone:(816) 524-4509

**Fees:**

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC300142667	\$50.00
9110052-Business License Penalty Fee	LC300142667	\$5.00