



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

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|-----------------|--|
| Receipt Number: | 2020053432 |
| Receipt Date: | 09/14/2020 |
| Date Paid: | 09/14/2020 |
| Payment Method: | Credit Card, |
| Check Number: | , |
| Full Amount: | \$50.00 |
| Amount Tendered | \$50.00 |
| Paid By: | B-ENVIED SALON/KELLI JO BARTHOLOMEW, Address:1911 PARKVIEW DR, Phone:(816) 600-5269 |

Fees:

| Fee Description | Reference / Application Number | Amount Paid |
|--------------------------|-----------------------------------|-------------|
| 9110058-Business License | LC800150797 | \$50.00 |
| | | |