



**LEE'S SUMMIT**  
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	
Receipt Date:	07/20/2021
Date Paid:	
Payment Method:	Check,
Check Number:	11262,
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	LC52143305	\$50.00