



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2021062308
Receipt Date:	08/24/2021
Date Paid:	08/24/2021
Payment Method:	Credit Card,
Check Number:	,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	A HEALTHY ALTERNATIVE MASSAGE THERAPY, Address:1280 NE TUDOR RD, Phone:(816) 554-8080

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC62140497	\$50.00