



**LEE'S SUMMIT**  
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2021064065
Receipt Date:	11/05/2021
Date Paid:	11/05/2021
Payment Method:	Cash,
Check Number:	,
Full Amount:	\$62.50
Amount Tendered	\$62.50
Paid By:	HEALTH HAVEN THERAPEUTIC MASSAGE, Address:407 W 86TH ST., Phone:(816) 277-5660

**Fees:**

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC62180209	\$50.00
9110052-Business License Penalty Fee	LC62180209	\$12.50