



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

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|-----------------|--|
| Receipt Number: | 2021064066 |
| Receipt Date: | 11/05/2021 |
| Date Paid: | 11/05/2021 |
| Payment Method: | Check, Cash, |
| Check Number: | 1023, , |
| Full Amount: | \$57.50 |
| Amount Tendered | \$57.50 |
| 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 | LC62140592 | \$50.00 |
| 9110052-Business License Penalty Fee | LC62140592 | \$7.50 |
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