



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2022072664
Receipt Date:	09/15/2022
Date Paid:	09/15/2022
Payment Method:	Check,
Check Number:	1134,
Full Amount:	\$52.50
Amount Tendered	\$52.50
Paid By:	LAKEWOOD CHIROPRACTIC PC, Address:731 NE LAKEWOOD BLVD, Phone:(816) 373-3373

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC62142523	\$50.00
9110052-Business License Penalty Fee	LC62142523	\$2.50