



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2023075556
Receipt Date:	02/06/2023
Date Paid:	02/06/2023
Payment Method:	Check,
Check Number:	18310,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	MIDWEST AUTO CLINIC, Address:190 NW OLDHAM PKWY, Phone:(816) 524-1969

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC81180183	\$50.00