



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

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|--------------------------|--|
| Receipt Number: | 2023078302 |
| Receipt Date: | 05/18/2023 |
| Date Paid: | 05/18/2023 |
| Payment Method: | Check, |
| Check Number: | 51126727, |
| Transaction Information: | |
| Full Amount: | \$50.00 |
| Amount Tendered | \$50.00 |
| Paid By: | CVS PHARMACY #4088, Address:1 CVS DR MC1160, Phone:(816) 966-1455 |

Fees:

| Fee Description | Reference / Application Number | Amount Paid |
|--------------------------|--------------------------------|-------------|
| 9110058-Business License | LC44141783 | \$50.00 |
| | | |