



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

| | |
|--------------------------|--|
| Receipt Number: | 2023078982 |
| Receipt Date: | 06/08/2023 |
| Date Paid: | 06/08/2023 |
| Payment Method: | Credit Card, |
| Check Number: | , |
| Transaction Information: | |
| Full Amount: | \$50.00 |
| Amount Tendered | \$50.00 |
| Paid By: | SMOKE TOKZ, Address:442 SE M 291 HWY, Phone:(816) 209-4726 |

Fees:

| Fee Description | Reference / Application Number | Amount Paid |
|--------------------------|--------------------------------|-------------|
| 9110058-Business License | LC44200379 | \$50.00 |
| | | |