



**LEE'S SUMMIT**  
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2023079149
Receipt Date:	06/12/2023
Date Paid:	06/12/2023
Payment Method:	Check,
Check Number:	1897,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	ERIN NEILL BROMLEY DDS PC, Address:680 SE BAYBERRY LN, Unit 105, Phone:(816) 525-5257

**Fees:**

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC62141382	\$50.00