



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

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|--------------------------|----------------------------------------------------------------------------------------------------------------|
| Receipt Number: | 2024084904 |
| Receipt Date: | 02/06/2024 |
| Date Paid: | 02/06/2024 |
| Payment Method: | Check, |
| Check Number: | 096512, |
| Transaction Information: | |
| Full Amount: | \$12.50 |
| Amount Tendered | \$12.50 |
| Paid By: | CURANA HEALTH OF MISSOURI-KANSAS LLC, Address:8911 N CAPITAL OF TEXAS HWY BLDG 1 STE 110, Phone:(877) 279-5960 |

Fees:

| Fee Description | Reference / Application Number | Amount Paid |
|--------------------------------------|--------------------------------|-------------|
| 9110052-Business License Penalty Fee | LC62240063 | \$12.50 |
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