LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2024086224
Receipt Date:	03/28/2024
Date Paid:	03/28/2024
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	$50.00
Amount Tendered	$50.00
Paid By:	Counseling with Compassion, Address:27830 E 133rd St

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC62230127	$50.00