



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2024087102
Receipt Date:	05/02/2024
Date Paid:	05/02/2024
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	RESTORATIVE HEALING MASSAGE THERAPY LLC, Address:601 SE RICHARDSON PLACE, Phone:(816) 334-7472

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC62220482	\$50.00