



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2024087155
Receipt Date:	05/03/2024
Date Paid:	05/03/2024
Payment Method:	Check,
Check Number:	1889,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	TWIN LAKES INSURANCE AGENCY, Address:2641 NE MCBAIN DR, Phone:(816) 525-2125

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC52144315	\$50.00