



**LEE'S SUMMIT**  
MISSOURI

RECEIPT OF PAYMENT

|                          |   |
|--------------------------|---|
| Receipt Number:          | 2024091237  |
| Receipt Date:            | 08/19/2024  |
| Date Paid:               | 08/19/2024  |
| Payment Method:          | Check,  |
| Check Number:            | 9116528376,   |
| Transaction Information: |   |
| Full Amount:             | \$50.00   |
| Amount Tendered          | \$50.00   |
| Paid By:                 | A & M NAIL STUDIO, Address:1228 NE Beacon Ave, Phone:(913) 522-8853 |

**Fees:**

| Fee Description          | Reference / Application Number | Amount Paid |
|--------------------------|--------------------------------|-------------|
| 9110058-Business License | LC81240568                     | \$50.00     |
|                          |                                |             |