



**LEE'S SUMMIT**  
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2024091717
Receipt Date:	09/05/2024
Date Paid:	09/05/2024
Payment Method:	Check,
Check Number:	100,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	SYNERGY HOME CARE, Address:200 NE MISSOURI RD, Phone:(816) 310-1503

**Fees:**

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC62220672	\$50.00