



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2025096244
Receipt Date:	04/11/2025
Date Paid:	04/11/2025
Payment Method:	Check,
Check Number:	131,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	LIV INSURANCE LLC, Address:500 SW MARKET ST UNIT B, Phone:(816) 524-2627

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC52220408	\$50.00