



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2025098916
Receipt Date:	06/26/2025
Date Paid:	06/26/2025
Payment Method:	Check,
Check Number:	2690,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	ERIN NEILL BROMLEY DDS PC, Address:680 SE BAYBERRY LN, Unit 105, Phone:(816) 525-5257

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC62141382	\$50.00