



LEE'S SUMMIT MISSOURI

220 SE Green Street | Lee's Summit, MO 64063 | P: 816.969.1000 | cityofls.net

RECEIPT OF PAYMENT

Receipt Number:	2016022383
Receipt Date:	09/08/2016
Date Paid:	09/08/2016
Payment Method:	Credit Card,
Check Number:	,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	SAINT LUKE'S HEALTH SYSTEM, Address:PO BOX 5870

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110077-Special Event Permit (application fee)	PRSE20162286	\$50.00