

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

RECEIPT OF PAYMENT

Receipt Number:	2017024886
Receipt Date:	03/27/2017
Date Paid:	03/27/2017
Payment Method:	Credit Card,
Check Number:	,
Full Amount:	\$100.00
Amount Tendered	\$100.00
Paid By:	GENESIS HEALTH CLUBS, Address:6100 E CENTRAL AVE #3, Phone:(816) 600-3213

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110062-Sign	PRSGN20170832	\$100.00
Permit-Permanent Fee		