



**LEE'S SUMMIT**  
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2020053135
Receipt Date:	09/02/2020
Date Paid:	09/02/2020
Payment Method:	Check,
Check Number:	2154,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	SALON & SPA DE CRIST, Address:905 SE LANGSFORD RD , Phone:(816) 525-9331

**Fees:**

Fee Description	Reference / Application Number	Amount Paid
9110062-Sign Permit-Temporary Fee	PRSGN20202757	\$50.00