

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

## **RECEIPT OF PAYMENT**

Receipt Number:	2017024692	
Receipt Date:	03/15/2017	
Date Paid:	03/15/2017	
Payment Method:	Check,	
Check Number:	1333335,	
Full Amount:	\$600.00	
Amount Tendered	\$600.00	
Paid By:	SAINT LUKES EAST HOSPITAL, Address:901 E 104TH ST MAILSTOP 900N	

## Fees:

Fee Description	Reference / Application Number	Amount Paid
9110077-Final Development Plan fee	PL2017063	\$600.00