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DEVELOPMENT SERVICES

RECEIPT OF PAYMENT

Receipt Number:	2018038873
Receipt Date:	11/19/2018
Date Paid:	11/19/2018
Payment Method:	Credit Card,
Check Number:	,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	SALON ALLURE/CARLI RAGSDALE, Address:512 W 91ST TERR, Phone:(816) 524-2902

**Fees:**

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800170772	\$50.00