

## **DEVELOPMENT SERVICES**

## **RECEIPT OF PAYMENT**

Receipt Number:	2018039003
Receipt Date:	12/04/2018
Date Paid:	12/04/2018
Payment Method:	Check,
Check Number:	4166,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	COURAGEOUS HOME CARE LLC, Address:501 SE DOUGLAS ST, Unit C, Phone:(816) 699-2352

## Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC300180103	\$50.00