
DEVELOPMENT SERVICES

RECEIPT OF PAYMENT

Receipt Number:	2019041667
Receipt Date:	05/16/2019
Date Paid:	05/16/2019
Payment Method:	Check,
Check Number:	1118,
Full Amount:	\$187.50
Amount Tendered	\$187.50
Paid By:	HAIR SLINGER SALON/SUSANNE BECHTEL, Address:28774 SLEEPY HOLLOW LN, Phone:(816) 525-2730

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800142217	\$50.00
9110052-Business License Penalty Fee	LC800142217	\$12.50
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9110052-Business License Penalty Fee	LC800142217	\$12.50
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9110052-Business License Penalty Fee	LC800142217	\$12.50