



DEVELOPMENT SERVICES

RECEIPT OF PAYMENT

Receipt Number:	2019041749
Receipt Date:	05/17/2019
Date Paid:	05/17/2019
Payment Method:	Check,
Check Number:	6015,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	KIDDING AROUND CHILD DEV CENTER, Address:1501 SW SUMMIT CROSSING CT, Phone:(816) 600-6440

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800142604	\$50.00