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 DEVELOPMENT SERVICES

## RECEIPT OF PAYMENT

Receipt Number:	2019041835
Receipt Date:	05/20/2019
Date Paid:	05/20/2019
Payment Method:	Check,
Check Number:	16468,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	MADHUKAR CHHATRE MD PC, Address:3151 NE CARNEGIE DR, Phone:(816) 347-0026

**Fees:**

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC300141274	\$50.00