

## **DEVELOPMENT SERVICES**

## **RECEIPT OF PAYMENT**

| Receipt Number: | 2019041976  |
|-----------------|---|
| Receipt Date:   | 05/21/2019  |
| Date Paid:      | 05/21/2019  |
| Payment Method: | Cash,   |
| Check Number:   | ,   |
| Full Amount:    | \$50.00   |
| Amount Tendered | \$50.00   |
| Paid By:        | MASSAGE HEIGHTS/ERIKA SHROUT, Address:312 SW ASCOT DR, Phone:(816) 554-3438 |

## Fees:

| Fee Description          | Reference / Application<br>Number | Amount Paid |
|--------------------------|-----------------------------------|-------------|
| 9110058-Business License | LC1100170409                      | \$50.00     |
|                          |                                   |             |