



DEVELOPMENT SERVICES

RECEIPT OF PAYMENT

Receipt Number:	2019042280
Receipt Date:	05/29/2019
Date Paid:	05/29/2019
Payment Method:	Check,
Check Number:	11053,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	TWIN LAKES INSURANCE AGENCY, Address:2641 NE MCBAIN DR, Phone:(816) 525-2125

**Fees:**

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800144315	\$50.00