



DEVELOPMENT SERVICES

RECEIPT OF PAYMENT

Receipt Number:	2019042593
Receipt Date:	06/05/2019
Date Paid:	06/05/2019
Payment Method:	Check,
Check Number:	1046,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	COLOR EXPRESSIONS/CANDICE KINARD, Address:426 SW BRIELLE LN, Phone:(816) 347-9000

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800160360	\$50.00