



DEVELOPMENT SERVICES

RECEIPT OF PAYMENT

Receipt Number:	2019043583
Receipt Date:	06/27/2019
Date Paid:	06/27/2019
Payment Method:	Credit Card,
Check Number:	,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	HEALING HANDS MASSAGE THERAPY/PAULA LIBERTY, Address:1111 NE NOELEEN CT, Phone:(816) 739-8914

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC1100140578	\$50.00