



DEVELOPMENT SERVICES

RECEIPT OF PAYMENT

Receipt Number:	2019043637
Receipt Date:	06/27/2019
Date Paid:	06/27/2019
Payment Method:	Check,
Check Number:	2456,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	RUSTICI WELLNESS CENTER, Address:3552 SW MARKET ST, Phone:(816) 623-3001

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC300143715	\$50.00