



DEVELOPMENT SERVICES

RECEIPT OF PAYMENT

Receipt Number:	2019044253
Receipt Date:	07/22/2019
Date Paid:	07/22/2019
Payment Method:	Check,
Check Number:	1515,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	SOLA SALON SUITES/SARAH MINKS, Address:146 NE EDGEWATER DR, Phone:(816) 347-1434

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800143552	\$50.00