

DEVELOPMENT SERVICES

RECEIPT OF PAYMENT

Receipt Number:	2019045031
Receipt Date:	08/21/2019
Date Paid:	08/21/2019
Payment Method:	Check,
Check Number:	10828,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	PAULSON INSURANCE AGENCY INC, Address:PO BOX 639, Phone:(816) 525-9927

**Fees:**

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800143305	\$50.00