



DEVELOPMENT SERVICES

RECEIPT OF PAYMENT

Receipt Number:	2019046008
Receipt Date:	10/08/2019
Date Paid:	10/08/2019
Payment Method:	Credit Card,
Check Number:	,
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	ZEN MASSAGE AND FACIALS/ KRISTIN LENNARD, Address:306 SW BLUE PKWY

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC800190671	\$50.00