

INVOICE

Date	Invoice #	Due Date
5/13/2019	LEAD2019-0001	5/25/2019
Risk Assessment Of. I	FWFY AVENUE SMOKE	SHOP TOR2015-018

Bill To

DEWEY AVENUE SMOKE SHOP
1405 DEWEY AVENUE
ROCHESTER, NY 14613

\$560 \$560.00	ce Date Description	Quantity	Rate	Amount
	\$560		\$560.00	\$560.00
\$160.00	\$160		\$160.00	\$160.00

Total: **\$720.00**

Customer Balance: \$720.00

Failure to remit payment by the due date will result in a late fee added to your balance due. Late fees are \$50 if your balance due is \$100 or more; or \$25 if your balance due is under \$100.

TO PROPERLY CREDIT YOUR ACCOUNT, PLEASE SEND IN THIS PAYMENT SLIP WITH YOUR PAYMENT

PAY ONLINE: https://ehpermits.monroecounty.gov/dev/pay
Make checks payable to: Monroe County Department of Public Health

Invoice #: LEAD2019-0001

Bill To DEWEY AVENUE SMOKE SHOP 1405 DEWEY AVENUE ROCHESTER, NY 14613

Monroe County Department of Public Health Childhood Lead Poisoning Prevention 111 Westfall Road, Room 844 Rochester, NY 14620

Total: \$720.00