

INVOICE

Date	Invoice #	Due Date
5/30/2019	FS2019-2700	5/31/2019

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Bill To		Invoice For Facility
Wayne County Coroner		
Attn: County Administrator's Office		
26 Church St.		
Lyons, NY 14489		
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Description	Amount
Level 1 Food Worker Certification	\$140.00
Level 1 Recertification Course	\$100.00
Custom Item	\$-60.00
	Total: \$180.00

Customer Balance: \$6,990.00

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

QUESTIONS/PAY BY PHONE: (585) 753-5064

Make checks payable to: Monroe County Department of Public Health

Facility: Wayne County Health Department

FAC #:

Invoice #: FS2019-2700

Bill To

Wayne County Coroner

Attn: County Administrator's Office

26 Church St. Lyons, NY 14489

Monroe County Food Protection 111 Westfall Road, Room 832 Rochester, NY 14620

Total: \$180.00