

## **INVOICE**

9/19/2014	DC2014-0038	11/3/2014		
Date	Invoice #	Due Date		

Bill To

BERNICE FALLONE FALLONE'S FUNTIME CENTER 70 QUAIL LANE ROCHESTER, NY 14624

Paid Date	Item			Description		Quantity	Price	Amount
10/3/14	Day Care Capacity > 151 (2018 Daycare Food Service			2018 Daycare Food Service Ins	pection		\$0.00	\$330.00
	Inspection Fee \$330)		1	Fee \$330	1			
					1	To	tal: <b>\$3</b>	330.00

Customer Balance: \$0.00

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: <a href="https://ehpermits.monroecounty.gov/dev/pay">https://ehpermits.monroecounty.gov/dev/pay</a>
Make checks payable to: Monroe County Department of Public Health

Invoice #: DC2014-0038 Bill To

BERNICE FALLONE
FALLONE'S FUNTIME
CENTER
70 QUAIL LANE
ROCHESTER, NY 14624

Monroe County Department of Public Health Bureau of Public Health Engineering 111 Westfall Road, Room 916 Rochester, NY 14620

Total: \$330.00