



RECEIPT

2016 MHSRS Payment Details

Payment Date: Wednesday, 20 July 2016**Payment ID:** #357633 (8503)**Billing Information**

Rachel LeCover
843 HARTFORD ST
Unit 1
LAFAYETTE, IN 47904
USA
rlecover@gmail.com
8057094146

ID	Description	Qty	Price	Item Total
4232	Non-Government Civilian Full Attendance	1	\$650.00	\$650.00

Discount: (\$0.00)
Tax: \$0.00

Total: \$650.00**Payment Terms Agreement**

I understand that my payment is non-refundable.