

RECEIPT OF PAYMENT

Receipt Number:	2025100823
Receipt Date:	09/03/2025
Date Paid:	09/03/2025
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	HAYDN R AMBROSE, Address:705 SQUIRE CT, Phone:(816) 847-1902

Fees:

Fee Description	Reference / Application Number	Amount Paid
Valuation Fee for New Other	PRRES20253726	\$50.00