



**LEE'S SUMMIT**  
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2023081060
Receipt Date:	08/10/2023
Date Paid:	08/10/2023
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$75.00
Amount Tendered	\$75.00
Paid By:	Ashley Kirby, Address:5207 NW Crooked Rd, Phone:(816) 969-9010

**Fees:**

Fee Description	Reference / Application Number	Amount Paid
9110080-3rd and Subsequent Inspection Fee (Per Hour)	PRRES20216094	\$75.00