



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

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|--------------------------|--|
| Receipt Number: | 2023081447 |
| Receipt Date: | 08/24/2023 |
| Date Paid: | 08/24/2023 |
| Payment Method: | Credit Card, |
| Check Number: | , |
| Transaction Information: | |
| Full Amount: | \$50.00 |
| Amount Tendered | \$50.00 |
| Paid By: | Kimberly W Berge, Address:15203 West 99th Street |

Fees:

| Fee Description | Reference / Application Number | Amount Paid |
|---|--------------------------------|-------------|
| 9110078-Valuation Fee for Add/Alter 3 or 4 Family | PRRES20233983 | \$50.00 |
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