



RECEIPT OF PAYMENT

Receipt Number:	2024087836
Receipt Date:	05/17/2024
Date Paid:	05/17/2024
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$100.00
Amount Tendered	\$100.00
Paid By:	Abigail Gaines , Address:550 Stanley Rd, Phone:(816) 682-0291

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110062-Sign Permit-Permanent Fee	PRSGN20242458	\$100.00