



RECEIPT OF PAYMENT

Receipt Number:	2024089152
Receipt Date:	06/18/2024
Date Paid:	06/18/2024
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$150.00
Amount Tendered	\$150.00
Paid By:	Lea Ross, Address:P.O. Box 202066, Phone:(855) 692-4723

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110062-Sign Permit-Temporary Fee	PRSGN20243087	\$150.00