



RECEIPT OF PAYMENT

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|--------------------------|--|
| Receipt Number: | 2024091027 |
| Receipt Date: | 08/12/2024 |
| Date Paid: | 08/12/2024 |
| Payment Method: | Credit Card, |
| Check Number: | , |
| Transaction Information: | |
| Full Amount: | \$176.88 |
| Amount Tendered | \$176.88 |
| Paid By: | Lisa McLallen, Address:1101 SW 1st Street , Phone:(816) 690-3173 |

Fees:

| Fee Description | Reference / Application Number | Amount Paid |
|--|--------------------------------|-------------|
| 9110078-Valuation Fee for Repair/Replace/Upgrade | PRRPR20244239 | \$176.88 |
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