

## **RECEIPT OF PAYMENT**

Receipt Number:	2024092601
Receipt Date:	10/16/2024
Date Paid:	10/16/2024
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$75.00
Amount Tendered	\$75.00
Paid By:	

## Fees:

Fee Description	Reference / Application Number	Amount Paid
9110080-3rd and Subsequent Inspection Fee (Per Hour)	PRRES20242432	\$75.00