



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

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|--------------------------|--|
| Receipt Number: | 2025094297 |
| Receipt Date: | 01/21/2025 |
| Date Paid: | 01/21/2025 |
| Payment Method: | Credit Card, |
| Check Number: | , |
| Transaction Information: | |
| Full Amount: | \$54.00 |
| Amount Tendered | \$54.00 |
| Paid By: | Jennifer Coakley, Address:6603 Royal Street, Bldg E, Phone:(816) 781-4707 |

Fees:

| Fee Description | Reference / Application Number | Amount Paid |
|-------------------------------------|--------------------------------|-------------|
| 9110078-Valuation Fee for New Other | PRRES20250183 | \$54.00 |
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