



RECEIPT OF PAYMENT

Receipt Number:	2025097464
Receipt Date:	05/19/2025
Date Paid:	05/19/2025
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$60.00
Amount Tendered	\$60.00
Paid By:	Bethany Wilson, Address:909 Troost Avenue, Phone:(913) 238-0403

Fees:

Fee Description	Reference / Application Number	Amount Paid
91100E5-Lane Closure(s) Fee	PRPWTC20252053	\$60.00