



RECEIPT OF PAYMENT

Receipt Number:	2025097484
Receipt Date:	05/19/2025
Date Paid:	05/19/2025
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$140.00
Amount Tendered	\$140.00
Paid By:	Elaine Fata, Address:11086 Strang Line Rd, Phone:(816) 269-9435

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110078-Valuation Fee for Alteration to Commercial	PRCOM20252041	\$140.00