

## RECEIPT OF PAYMENT

**Receipt Number:** 202403911

**Receipt Date:** October 31, 2024 **Date Paid:** October 31, 2024

**Full Amount:** \$150.00

Payment Details: Payment Method Amount Tendered Check Number

Check \$150.00 1110

**Amount Tendered:** \$150.00 **Change / Overage:** \$0.00

**Contact:** Orange Peel Bicycle Service LLC, Address:PO Box 775323

## **FEE DETAILS**

Fee DescriptionReference NumberAmount OwingAmount PaidSign PermitSPRSG241684\$150.00\$150.00