



## RECEIPT OF PAYMENT

<b>Receipt Number:</b>	202400929
<b>Receipt Date:</b>	April 08, 2024
<b>Date Paid:</b>	April 08, 2024
<b>Full Amount:</b>	\$200.00

<b>Payment Details:</b>	<b>Payment Method</b>	<b>Amount Tendered</b>	<b>Check Number</b>
	Credit Card	\$200.00	

<b>Amount Tendered:</b>	\$200.00
<b>Change / Overage:</b>	\$0.00
<b>Contact:</b>	Jacob Berman, Address:1556 woodbridge ct, Phone:(970) 761-3886

## FEE DETAILS

<b>Fee Description</b>	<b>Reference Number</b>	<b>Amount Owing</b>	<b>Amount Paid</b>
Limited Use Permit	PL20240102	\$200.00	\$200.00