



CITY OF PUYALLUP
Development & Permitting Services
333 S. Meridian, Puyallup, WA 98371
(253) 864-4165
www.cityofpuyallup.org

RECEIPT OF PAYMENT

Receipt Number: 2024001136
Receipt Date: May 30, 2024
Date Paid: May 30, 2024
Full Amount: \$920.63

Payment Details:	Payment Method	Amount Tendered	Check Number
	Check	\$920.63	101024

Amount Tendered: \$920.63
Change / Overage: \$0.00
Contact: C/O MULTICARE HEALTH SYSTEM, Address: PO BOX 5299, Phone: (253) 377-5318

FEE DETAILS

Fee Description	Reference Number	Amount Owning	Amount Paid
Building Plan Review Fee	PRCTI20240804	\$886.18	\$886.18
Plumbing Plan Review Fee	PRCTI20240804	\$34.45	\$34.45