



City of Seattle  
Office of Hearing Examiner Receipt

Receipt No. 4783

Received From Marcus Comer  
 Address (Physical or Email) marusc@cornerstonegci.com  
 City/State/Zip \_\_\_\_\_ Telephone Number 425-417-8075  
 Amount One Hundred Fifty Exactly Dollars \$ 150.00

How Paid	<input type="checkbox"/>	Number	Notes...
Check			
Money Order			
Credit Card	<input checked="" type="checkbox"/>	4852	Citation Penalty Pkt: 1059340-CT

Processed By Patricia Cole Date 12-5-24

SEA - HEAR EX  
700 5TH AVE SUITE 4000  
SEATTLE, WA 98104

12/05/2024 10:23:47  
 MID: XXXXXXXXXXXX954 TID: XXXX684

CREDIT CARD  
VISA SALE

Card # XXXXXXXXXXXX4852  
 SEQ #: 2  
 Batch #: 56  
 INVOICE  
 Approval Code: 068498  
 Entry Method: Manual  
 Mode: Online  
 Tax Amount: \$0.00  
 Cust Code:  
 Card Code: M

SALE AMOUNT \$150.00

I agree to pay above total amount  
according to card issuer agreement.  
(Merchant agreement if Credit Voucher)

ct #  
1059340-CT

MERCHANT COPY