

AFFIDAVIT

| duly sworn upon oath, that I served the therein addressed, by depositing copies welopes plainly addressed, as shown with st Office located at 310 East Street, Suite 2025 Eric Schmett Jonesboro Code Enforcement |
|--|
| MARIA RESENDEZ COMMISSION # 0000932 (PIRES: March 10, 2034 Craighead County |
| 1 : t |

My commission expires: __10 March 2034

253517



| DATE | INVOICE NO |
|----------|------------|
| 8/6/2025 | 0069539 |

BILL TO

Mickaul Rolland 2106 Cotton Street Jonesboro, AR 72401

| | | | | | | DUE DATE | | | |
|------------------------------|----------|----------------|--------|----------|--------|-----------|--|--|--|
| | | • | | | [| 9/10/2025 | | | |
| DESCRIPTION | QUANTITY | EFFECTIVE RATE | AMOUNT | DISCOUNT | CREDIT | BALANCE | | | |
| PREVIOUS OUTSTANDING BALANCE | | | | | | 6,311,2 | | | |
| Code Enforcement Charges: | | | | | | | | | |
| filing Fee-2106 Cotton | 1.00 | 15.00 | 15.00 | 0.00 | 0.00 | 15. | | | |
| Admin, Fee-2106 Cotton | 1.00 | 200,00 | 200,00 | 0.00 | 0.00 | 200.0 | | | |
| Mowing-2106 Cotton | 1.00 | 60.00 | 60.00 | 0.00 | 0.00 | 60.6 | | | |
| | | INVOICE TOTAL: | 275.00 | 0.00 | 0.00 | 275. | | | |

PLEASE DETACH BOTTOM PORTION & REMIT WITH YOUR PAYMENT

For questions please contact us at (870) 932-3042

Customer Name:

Mickaul Rolland

Customer No:

023610

Account No:

0035665 - Code Enforcement Charges

 DUE DATE
 INVOICE NO

 9/10/2025
 0069539

Please remit payment by the due date to:

City of Jonesboro 300 South Church Street

PO Box 1845

Jonesboro, AR 72403

H Payment is not made with to real subsidered on re

 Invoice Total:
 275.00

 Discounts:
 0.00

 Credit Applied:
 0.00

 Ending Balance:
 6,586.23

INVOICE BALANCE:

AMOUNT PAID:

\$275.00

U.S. Postal Service 57 CERTIFIED MAIL® RECEIPT Domestic Mail Only 0413 For delivery information, visit our website at www.usps.com®. Certified Mail Fee =0 m TU Extra Services & Fees (check box, add fee as appro-П Return Receipt (hardcopy) Return Receipt (electronic) Postmark 5270 Certified Mail Restricted Odia Here Adult Signature Required Adult Signature Restricted Delivery Postage 0770 Total Postage and Fees Sent To MICKAUL ROLLAND Street and Apt. No., or PO Box No. 2106 COTTON ST 40 5 0 City, State, ZIP+4 See Reverse for Instructions

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