

TREASURY DIVISION DAILY DEPOSIT

Transmittals for:
PROJECTS Only

Payment-in-Lieu for Storm Water Quality Volume Requirement

AMOUNT	ACCOUNT NUMBER	FUND NUMBER	BUSINESS UNIT	PROJECT ID	ACTIVITY ID	AMOUNT
8,872.00	461615	305	PCDMD	24_MS4	7547210	8,872.00
					TOTAL	8,872.00

Hydrology#: G20D054 Name: Presbyterian Medical Group
Payment In-Lieu for Storm Water Quality
Volume Requirement


Address/Legal Description: 8810 / 8910 Montgomery Blvd NE

DEPARTMENT NAME: Planning Department/Development Review Services, Hydrology

PREPARED BY Debi L Fox PHONE 505-924-3895

BUSINESS DATE 9/5/25

DUAL VERIFICATION 
EMPLOYEE SIGNATURE

AND BY 
EMPLOYEE SIGNATURE

REMITTER: _____
AMOUNT: _____
BANK: _____
CHECK #: _____ DATE ON CHECK: _____

The Payment-in-Lieu can be paid at the Plaza del Sol Treasury, 600 2nd St. NW. **Bring three copies of this invoice to the Treasury** and provide a copy of the receipt to Hydrology, Suite 201, 600 2nd St. NW, or e-mail with the Hydrology submittal to PLNDRS@cabq.gov.

City of Albuquerque

Reference Number: 2025252002-16
Date/Time: 09/09/2025 2:37:28 PM

Departmental Deposit
2025252002-16-1
Departmental Deposit 1@ \$8,872.00
GL #: 13051461615|PCDMD|24MS4|7547210|
Total: \$8,872.00

1 ITEM TOTAL: \$8,872.00

TOTAL: \$8,872.00

DUPLICATE RECEIPT 9/9/2025 2:38:03 PM

Check

\$8,872.00

Bank Account #: *****7714

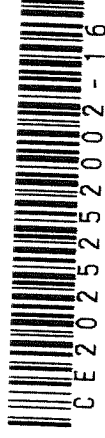
Check Number: 008037

Bank Routing #: *****0327

Address:

Total Received:

\$8,872.00



Thank you for your payment.