Anna Burk, Collector

PO BOX 256 GALENA, MO 65656 Phone: 417-357-6124

STONE COUNTY ONLINE TAX STATEMENT 2024 REAL ESTATE

Pay By Phone 1-800-652-0405 follow prompts Use County Number 20 when prompted PIN for telephone payment: 22432131

DAVIDSON, ROBERT C (RVLT) 103 RUSTIC RIDGE DR SHELL KNOB MO 65747

M-CODE:

PARCEL ID#: 15-8.0-28-000-000-007.020

SEC, TWN, RNG: 28-22-24 ACRES: 3.50

SITUS ADDRESS:

| Property Description | | | | |
|------------------------|-----------------|--------|--|--|
| RUSTIC RIDGE ESTATES 1 | | | | |
| | | | | |
| | | | | |
| | | | | |
| Residential | | 34,500 | | |
| Agricultural | | 0 | | |
| Commercial | | 0 | | |
| SUBTOTALS | | 34,500 | | |
| | TOTAL VALUATION | 34,500 | | |

| Tax District | Levy per \$100 | Total Tax |
|--------------|----------------|-----------|
| | | |
| STATE | 0.0300 | 10.35 |
| CNTY | 0.0907 | 31.29 |
| HLTH | 0.1000 | 34.50 |
| SRCT | 0.0482 | 16.63 |
| LIBR | 0.1000 | 34.50 |
| HANDI | 0.1000 | 34.50 |
| R5 | 3.9736 | 1,370.89 |
| CCFD | 0.9405 | 324.47 |
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| | | |
| otal Due: | | 1,857.13 |

PAY TAXES/PRINT RECEIPTS ONLINE AT:

www.stonecountycollector.com

Make Checks Payable to: Stone County Collector of Revenue PO BOX 256 GALENA, MO 65656

PLEASE NOTE:

- If you have sold this property and are not responsible for the taxes, please forward this statement to the new owner or notify the Collector's office.
- IF TAXES ARE PAID BY YOUR MORTGAGE COMPANY, YOU MUST FORWARD THIS BILL TO THEM.
- FAILURE TO RECEIVE A TAX STATEMENT DOES NOT RELIEVE THE TAXPAYER FROM TAX OBLIGATION NOR THE PENALTIES & INTEREST.

Date Printed: 11/11/2024

METHOD OF PAYMENT AND ADDRESS CHANGE INFORMATION IS LOCATED ON BACK RETURN BOTTOM PORTION WITH PAYMENT AND KEEP TOP PORTION FOR YOUR RECORDS.

2024 STONE COUNTY REAL ESTATE STATEMENT

DAVIDSON, ROB<mark>ERT C (</mark>RVLT) 103 RUSTIC RIDGE DR SHELL KNOB MO 65747

TOTAL TAX DUE BY END OF November, 2024

1,857.13

PARCEL ID#: 15-8.0-28-000-000-007.020



0224158028000000070200



After December 31st, 2024, Pay With Penalty and Interest as Follows:

| 2024 TAX PAID IN 2025 | | | |
|-----------------------|----------|--|--|
| January | 2,064.75 | | |
| February | 2,105.25 | | |
| March | 2,156.90 | | |
| April | 2,197.39 | | |
| May | 2,237.87 | | |
| June | 2,278.36 | | |
| July | 2,318.84 | | |
| August | 2,359.33 | | |
| Sept-Dec | 2,399.81 | | |

Date Printed: 11/11/2024

IF ANY REAL ESTATE TAXES ARE PAID BY YOUR MORTGAGE CO. YOU MUST FORWARD THE CORRECT STATEMENT TO THEM.

Oldest Delinquent Year Must Be Paid First (Printed in red under blue box on right side)

Regular Courthouse hours are MON - FRI 8:00am - 4:00pm The Courthouse is closed holidays and weekends. For your convenience, a drop box is available at the North Entrance of the Historic Courthouse in Galena. Visit www.stonecountycollector.com for office details. If paying delinquent, please refer to the blue box on the bottom of statement for amount due.

If your vehicle tags expire in January, pay your personal property tax by December 1st

Keep THIS Portion For Your Records **Return BOTTOM Portion With Payment** **To Avoid Penalties Pay This Statement By December 31** **If Address Change Is Requested, Return Bottom Portion With New Address** PLEASE NOTE:

- 1) Make check payable to: Stone County Collector of Revenue
 - 2) IF PAYING IN PERSON, bring this entire statement
- 3) IF PAYING BY MAIL, return bottom portion of this statement
- 4) IF PAYING BY PHONE, refer to top portion of statement for information.
 - 5) IF PAYING ONLINE, go to www.stonecountycollector.com
 - 6) Questions about paying this bill? Contact Collector at 417-357-6124
- 7) Questions about assessments, legal descriptions, or vehicle listings? Contact the Assessor.

Assessor Personal Property Department: 417-357-6141 Assessor Real Estate Department: 417-357-6145

8) A paid receipt will be mailed to the address indicated.

FAILURE TO RECEIVE A TAX BILL DOES NOT RELIEVE THE TAXPAYER OF TAX OBLIGATION, INCLUDING PENALTIES AND INTEREST **NON-CLEARANCE OF CHECK VOIDS RECEIPT. NSF FEES APPLY**









Credit card payments subject to a convenience fee of (2.4%, \$1.50 minimum)

If requesting a CHANGE OF ADDRESS, complete this section and return with payment.

| Name: | |
|--------------------------|--|
| Address Change: | |
| Address Change: | |
| City, State, Zip Change: | |