

Missouri Department of Revenue  
**Recorder's Monthly User Fee Report**

County Name
County Address
User Fee Collections For The Month of:

Local Records Preservation Fund and Land Survey <a href="#">Section 59.319 (1), RSMo</a> _____ X \$2 = _____ Check Number _____
State Housing Trust Fund <a href="#">Section 59.319 (2), RSMo</a> _____ X \$3 = _____ Check Number _____
Total Due = \$ _____

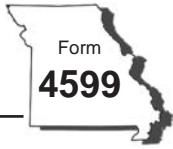
<b>Signature</b>	Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct.	
	Signature	Date (MM/DD/YYYY) ____/____/____

**Mail to:** Taxation Division  
P.O. Box 453  
Jefferson City, MO 65105-0453

**Phone:** (573) 751-5900  
**Fax:** (573) 522-1720  
**E-mail:** [countyfees@dor.mo.gov](mailto:countyfees@dor.mo.gov)

Visit  
<http://dor.mo.gov/business/citycounty/>  
for additional information.

Form 4599 (Revised 10-2015)



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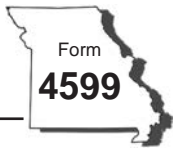
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