

DEBIT MEMORANDUM

TO :
DEPT. OF STATE

* FOR OFFICIAL USE
* DATE NUMBER
*
*
*
*

P94000084964

* STATE OF FLORIDA
* OFFICE OF STATE TREASURER
* TALLAHASSEE, FLORIDA
*

FUND	AMOUNT	REASON RETURNED	KEY #		
GENERAL REVENUE	0.00	INSUFFICIENT FUNDS	1	*	*
TRUST	998.25	ACCOUNT CLOSED	2	*	2 *
OTHER		UNCOLLECTED FUNDS	3	*	*
TOTAL	998.25	OTHER	4	*	*

CROSS REF	SAMAS CODE	DISTRIBUTION	REASON	AMOUNT
012	45-20-2-130001-45300000-00-000100-00		1	117.00
012	45-20-2-130001-45300000-00-000100-00		1	131.25
012	45-20-2-130001-45300000-00-000100-00		1	750.00

GRAND TOTAL: \$ 998.25
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82147-B

JAN 08 1998

900002432009--6
-02/16/98--01114--006
***787.50 ***787.50

Process Date: 12/24/97

The above named fund(s) has been reduced by the amount of this check(s) under authority of Section 215.34, F.S.

Bill Nelson

State Treasurer