

DEBIT MEMORANDUM

* FOR OFFICIAL USE

* DATE

* NUMBER

TO :
DEPT. OF STATE

N 509 73 6 99

00053

* STATE OF FLORIDA

* OFFICE OF STATE TREASURER

* TALLAHASSEE FLORIDA

*

FUND	AMOUNT	REASON RETURNED	KEY #
GENERAL REVENUE	0.00	INSUFFICIENT FUNDS	1
TRUST	2,991.25	ACCOUNT CLOSED	3
OTHER		UNCOLLECTED FUNDS	3
TOTAL	2,991.25	OTHER	4

CROSS
REF

DISTRIBUTION

SAMAS CODE

REASON

AMOUNT

012	45-20-2-130001-45300000-00-000100-00	1	8.75
012	45-20-2-130001-45300000-00-000100-00	4	8.75
012	45-20-2-130001-45300000-00-000100-00	2	8.75
012	45-20-2-130001-45300000-00-000100-00	1	40.00
012	45-20-2-130001-45300000-00-000100-00	3	60.00
012	45-20-2-130001-45300000-00-000100-00	4	61.25
012	45-20-2-130001-45300000-00-000100-00	2	150.00
012	45-20-2-130001-45300000-00-000100-00	1	150.00
012	45-20-2-130001-45300000-00-000100-00	1	150.00
012	45-20-2-130001-45300000-00-000100-00	2	150.00
012	45-20-2-130001-45300000-00-000100-00	1	150.00
012	45-20-2-130001-45300000-00-000100-00	3	550.00
012	45-20-2-130001-45300000-00-000100-00	1	603.75
012	45-20-2-130001-45300000-00-000100-00	4	900.00

GRAND TOTAL:

\$ 2,991.25

=====

00053-M

Process Date: 06/21/99

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

RECEIVED
99 JUL -8 PM 1:10
BUREAU OF
TRAINING, RECRUITING AND
FINANCIAL MANAGEMENT
State Treasurer