

DEBIT MEMORANDUM

FOR OFFICIAL USE

DATE

NUMBER

TO :
DEPT. OF STATE

89400069240

STATE OF FLORIDA
OFFICE OF STATE TREASURER
TALLAHASSEE FLORIDA

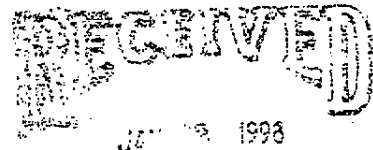
FUND	AMOUNT	REASON RETURNED	KEY #
GENERAL REVENUE	0.00	INSUFFICIENT FUNDS	1
TRUST	5,100.00	ACCOUNT CLOSED	2
OTHER		UNCOLLECTED FUNDS	600802438818-1
TOTAL	5,100.00	OTHER	

CROSS REF	SAMAS CODE	DISTRIBUTION	REASON	AMOUNT
012	45-20-2-130001-45300000-00-000100-00		2	35.00
012	45-20-2-130001-45300000-00-000100-00		1	70.00
012	45-20-2-130001-45300000-00-000100-00		1	78.75
012	45-20-2-130001-45300000-00-000100-00		1	78.75
012	45-20-2-130001-45300000-00-000100-00		4	122.50
012	45-20-2-130001-45300000-00-000100-00		1	4,715.00

GRAND TOTAL:

\$ 5,100.00

82294-C



OFF. OF ADMIN SERVICES
PERSONNEL

Process Date: 01/08/98

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