

DEBIT MEMORANDUM

* FOR OFFICIAL USE
* DATE NUMBER

TO :
DEPT. OF STATE

P 96 0000 29299

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

FUND	AMOUNT	REASON RETURNED	KEY #
GENERAL REVENUE	0.00	INSUFFICIENT FUNDS	1
TRUST	3,715.00	ACCOUNT CLOSED	2
OTHER		UNCOLLECTED FUNDS	3
TOTAL	3,715.00	OTHER	4

CROSS REF	SAMAS CODE	REASON	AMOUNT
012	45-20-2-130001-45300000-00-000100-00	1	70.00
012	45-20-2-130001-45300000-00-000100-00	1	87.50
012	45-20-2-130001-45300000-00-000100-00	1	87.50
012	45-20-2-130001-45300000-00-000100-00	1	87.50
012	45-20-2-130001-45300000-00-000100-00	1	122.50
012	45-20-2-130001-45300000-00-000100-00	3	122.50
012	45-20-2-130001-45300000-00-000100-00	1	165.00
012	45-20-2-130001-45300000-00-000100-00	1	375.00
012	45-20-2-130001-45300000-00-000100-00	1	750.00
012	45-20-2-130001-45300000-00-000100-00	4	923.75
012	45-20-2-130001-45300000-00-000100-00	1	923.75

GRAND TOTAL:

\$ 3,715.00
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DEC 19 1997

81906 - F

300002401129--9
-01/15/98--01027--005
***787.50 ***787.50

Process Date: 12/02/97

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