

PRESTON'S  
MOVING & STORAGE  
AGENTS FOR  
**Wheaton**  
*Van Lines, Inc.*  
WORLD WIDE MOVING

VETERANS HWY  
E. PLEASANT ST





secured by ADT 1960



1960

UNIT

911

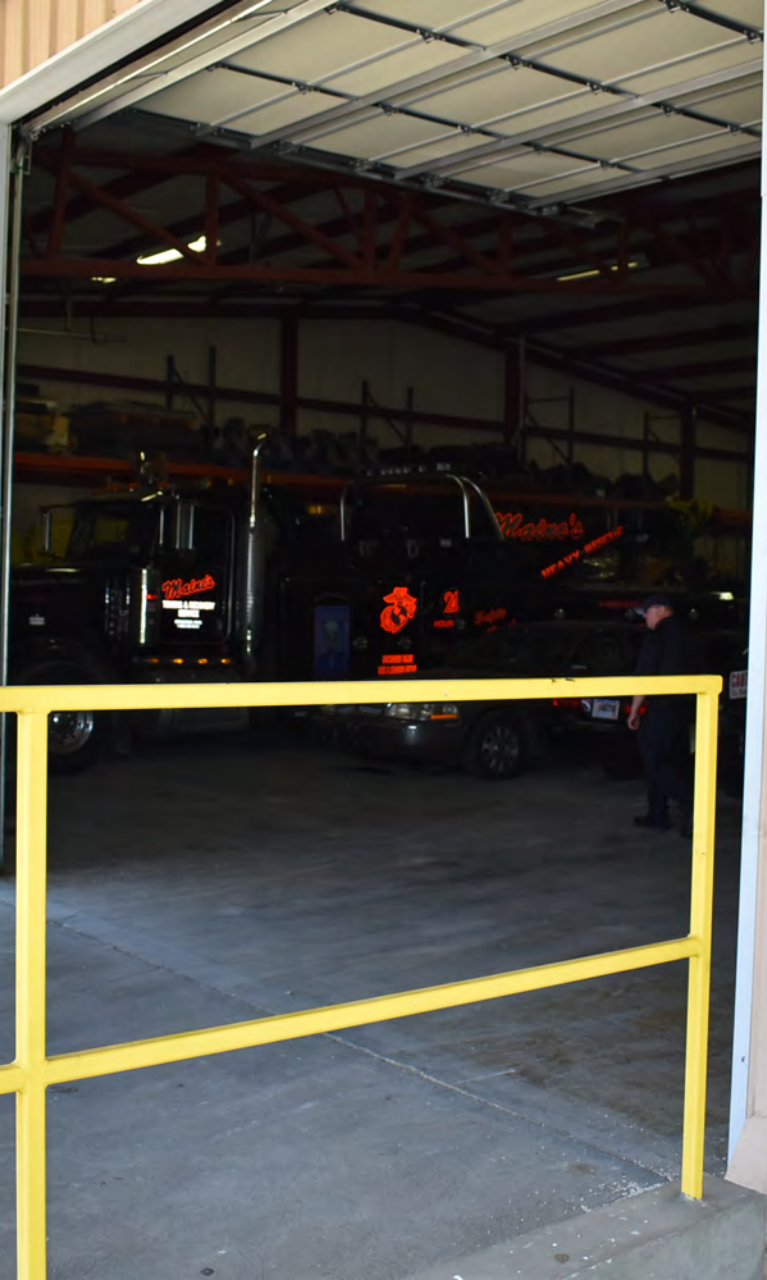
ABSOLUTELY  
NO SMOKING  
IN WAREHOUSE



SAFETY

WAREHOUSE

NO  
TRESPASSING





Malme's  
HEAVY RESCUE



24  
HOUR

Safety

1-800-823-6910

RECOMMEND WEAR  
YOUR SEATBELT

Since 1978

CAUTION!  
Do Not Enter!

CHEVROLET

800-522-4618  
www.kandyshop.com

*Kandy Shop*  
Custom Paint and Graphics  
887-680-0113  
www.kandyshop.com

**CAUTION!**  
Do Not Enter!

OHIO  
HWV 3615  
CLARK

TRAILBLAZER

CHEVROLET



Maine's

aine's  
ING & RECOVERY  
SERVICE

WE MUST NEVER FORGET

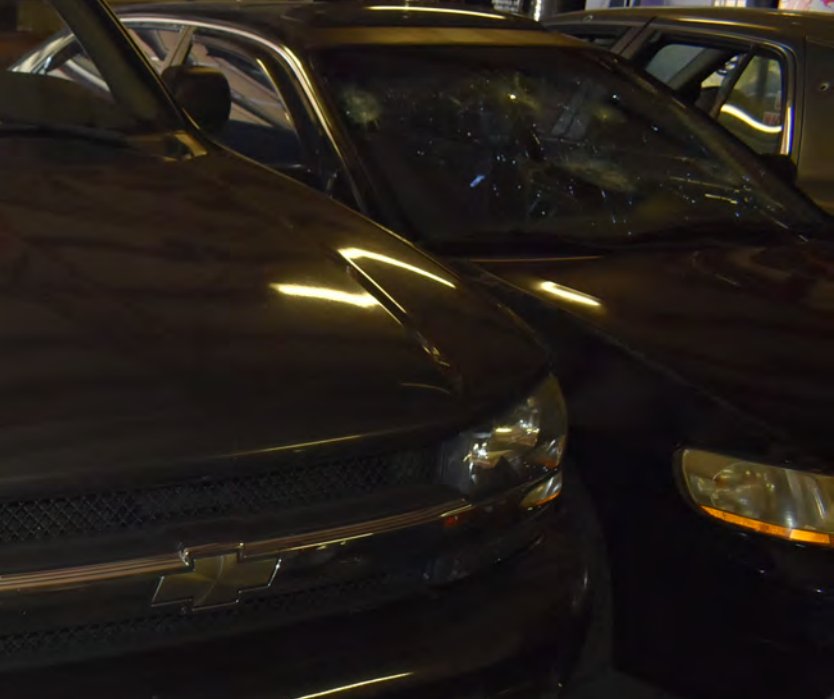
L5

Trailering Package

KELLY

EDGE RT









39414

*[Faint, illegible handwritten notes]*

*[Faint, illegible handwritten notes]*

(937) 536-2742  
Roy

① 4/6/20  
2/1/19

~~1-800-850-7500~~  
~~1-800-850-7500~~  
~~1-800-850-7500~~

~~230-412-1234~~

~~(937) 536-2742~~

tylerford28@gmail.com

(937) 536-2742  
Rof

~~Street address  
City, State, ZIP  
Country~~

© 2008

LENDT 135832338483



Sport  
TRAILBLAZER  
LS













Maluc's  
HEAVY METAL

1-800-









WARNING  
Do not use this seat  
with a child or pet.  
Do not use this seat  
with a dog or cat.

















AIR BAG

















MFD BY GENERAL MOTORS CORP

03/03

GVWR  
2608KG(5750LB)GAWR FRT  
1338KG(2950LB)GAWR RR  
1452KG(3200LB)

THIS VEHICLE CONFORMS TO ALL APPLICABLE U.S. FEDERAL MOTOR  
VEHICLE SAFETY AND THEFT PREVENTION STANDARDS IN EFFECT ON  
THE DATE OF MANUFACTURE SHOWN ABOVE.

1GNDD13S832338483

TYPE: M.P.V.

MODEL: T15506 PAYLOAD = 519KG(1144LB)

TPMD TIRE SIZE SPEED RTG

RIM

COLD TIRE PRESSURE

FRT P245/70R16

S

16X7J

220KPA(32PSI)

RR P245/70R16

S

16X7J


220KPA(32PSI)

SPA P245/70R16

S

16X7J

240KPA(35PSI)

SEE OWNER'S MANUAL  FOR MORE INFORMATION.



MPH 140 100 80 60 40 20 0























*Kandy Shop*  
Custom Paint and Graphics  
937-430-0163  
www.thekandyshop.net

**CAUTION!**  
Do Not Enter!

OHIO  
HWV 3615  
CLARK

TRAILBLAZER









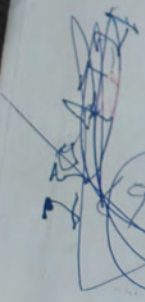


~~SUPPLY NACHO DORITOS~~  
~~25 OFF DIET TOP~~  
~~1 BAR CON QUESO~~  
~~CHEESE~~

tylerford28@gmail.com

~~(937) 641-0085~~ (937) 536-2742  
ROY

① 4/5/16  
4/7/16  
4/9/16



Clermont County Job and Family Services  
2400 CLERMONT CENTER DR  
STE 106A  
BATAVIA, OH 45103

# Ohio

**Case** 5691137  
**Name** Roger Sherrock  
**Mail Date** 12/01/2020

Roger Sherrock  
1363 S CENTER BLVD  
SPRINGFIELD, OH 45506-2748

### Questions? Ask your worker

**TDD-For Hearing Impaired** 7-1-1  
**County Telephone** 1 (513) 732-7111  
**Office Hours** Mon-Fri 8:00am-4:30pm

If you are unable to read English and need this notice translated into your preferred language, contact your case worker. Please call the number listed above for assistance.

If you believe you have been discriminated against or if your county agency has not provided you with an interpreter or a translation of this notice; and you wish to file a complaint, contact ODJFS Bureau of Civil Rights at 1-866-227-6353; the hearing-impaired may call TDD 7-1-1.

### Application/ Reapplication Verification Request List

If you are associated with additional cases, other than the one listed here on this notice, this request for verification impacts all of your benefits across all cases.

Certain eligibility factors must be verified before the County Department of Job and Family Services (CDJFS) can determine your eligibility for public assistance (Medicaid, SNAP and Cash). In order to determine your eligibility, verification of your statements on the application is required. Failure to submit the required information may result in a denial of your application or a termination of your benefits. If you have any trouble or cannot obtain any or all of the information needed, please call your local CDJFS office for assistance.

You must supply this information to your local CDJFS in any one of these ways:

- **Online:** If you have an online account, go to [ssp.benefits.ohio.gov](http://ssp.benefits.ohio.gov), logon, and click View/Upload my documents
- **By mail:** Mail the requested information to the CDJS address listed above
- **Fax:** (513) 732-7216
- **In person:** Visit your local CDJFS

If you do not understand or have questions about this notice, please contact the agency named above.

The following verifications are being requested:

Type of Verification	Category	For Person	Description	Due Date
Residence		Roger Sherrock	residency verification - household id completed by non-relative	12/10/2020
Income	Earnings	Roger Sherrock	statement zero income	12/10/2020
Expense Amount	Shelter	Roger Sherrock	rent \$150.00	12/10/2020





