



POLICE
ST



CHEVROLET

POLICE
STATION



3-48-3



[Redacted]

POLICE

POLICE
STRUTHERS

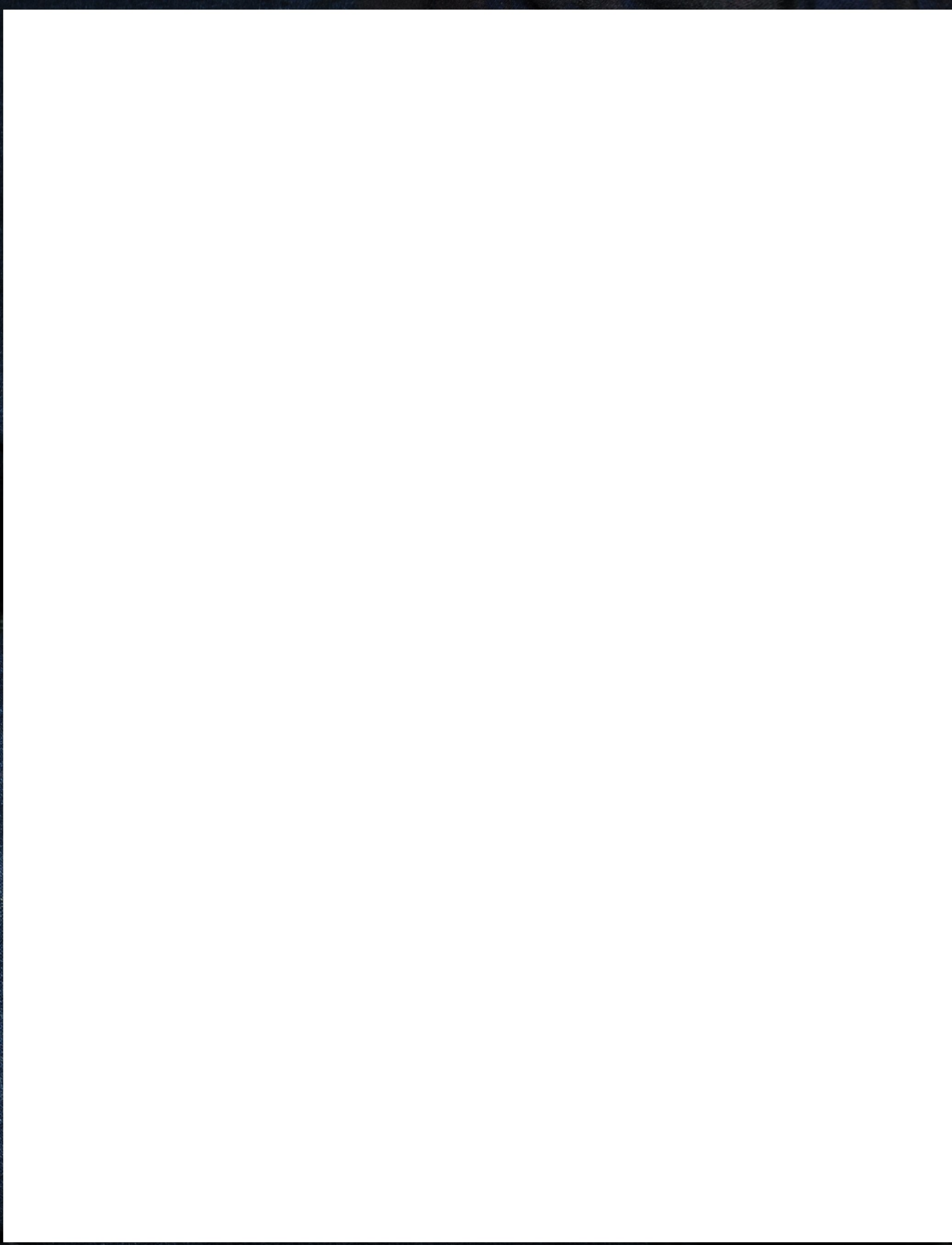


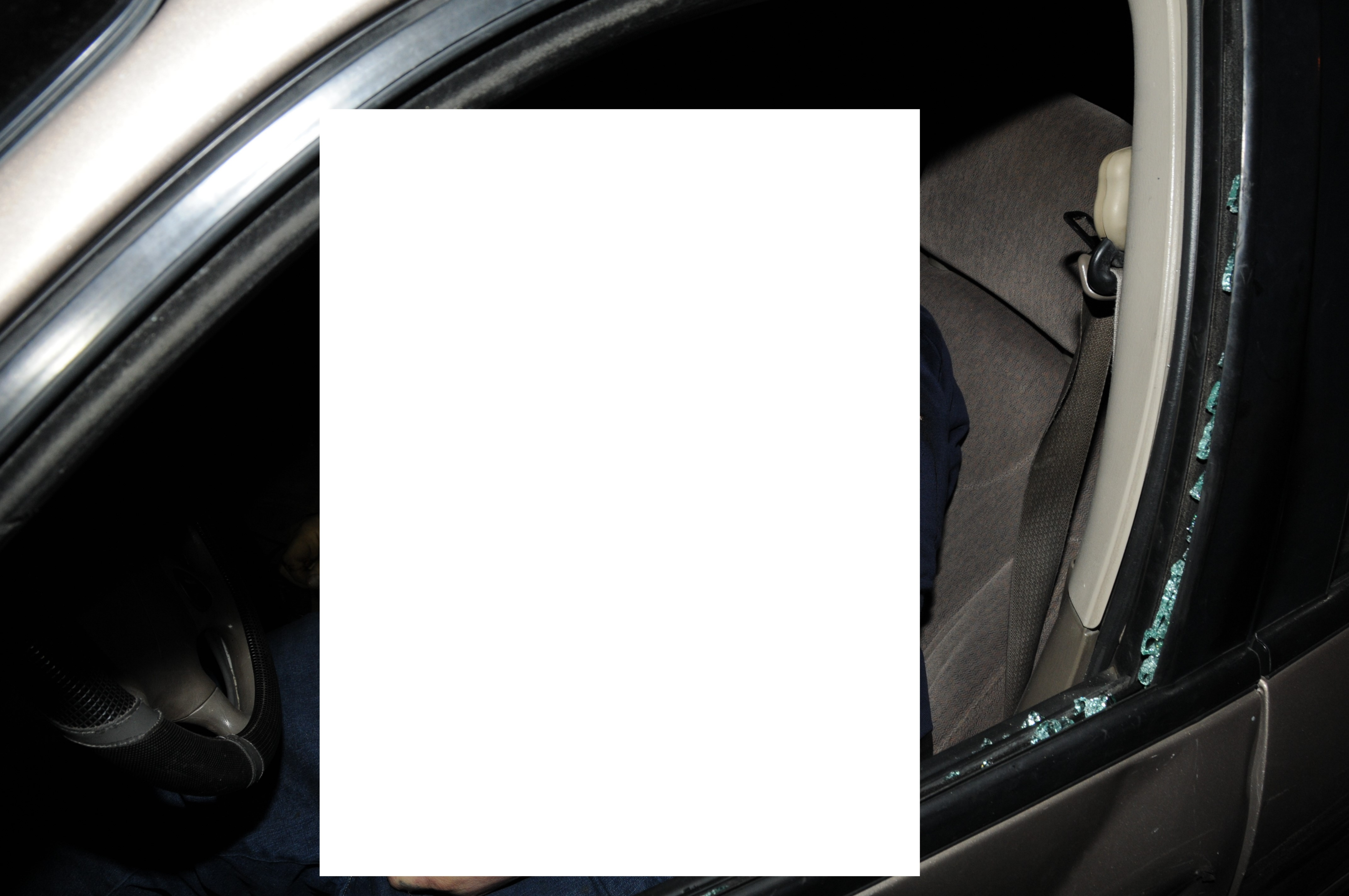


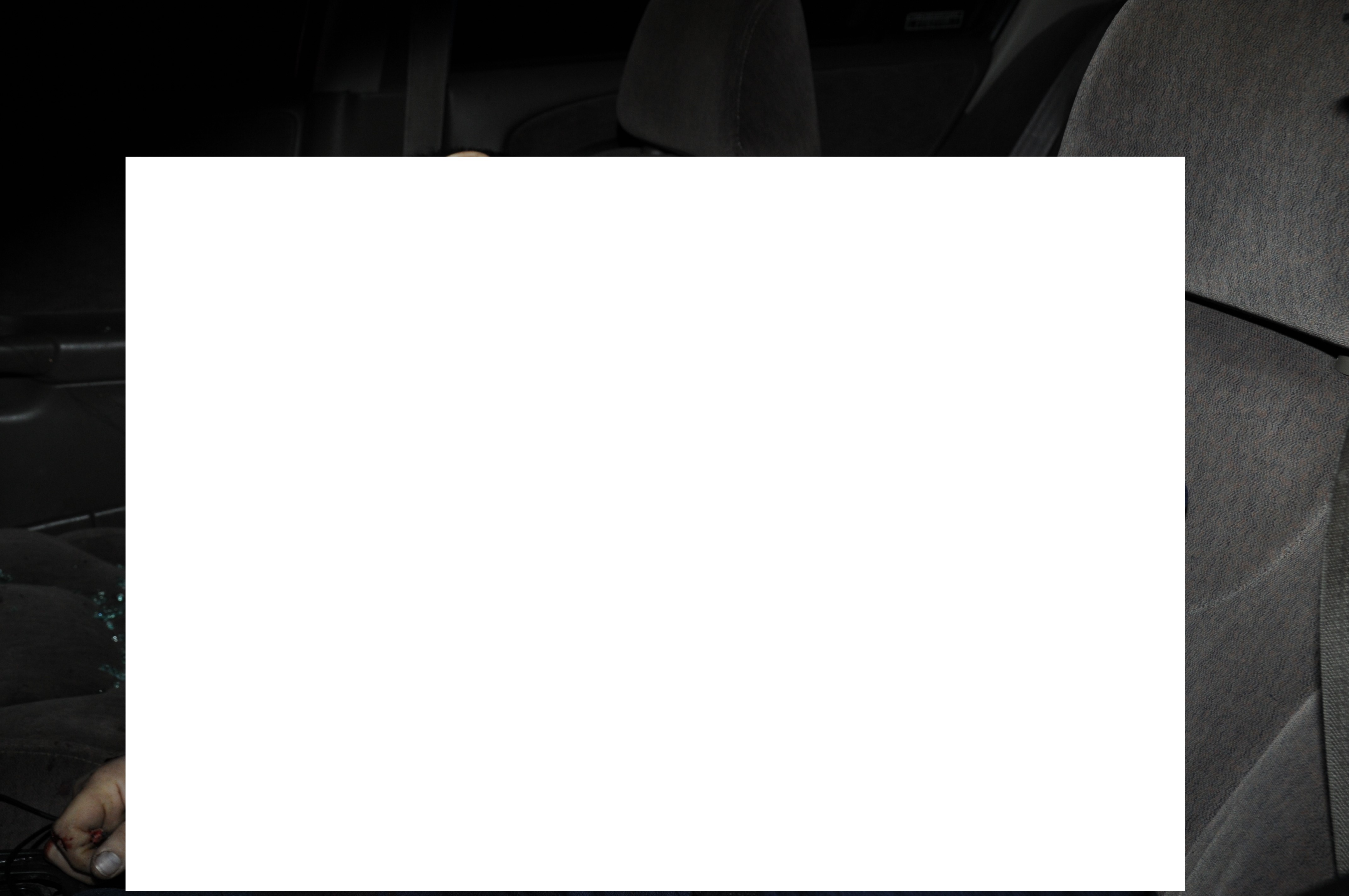




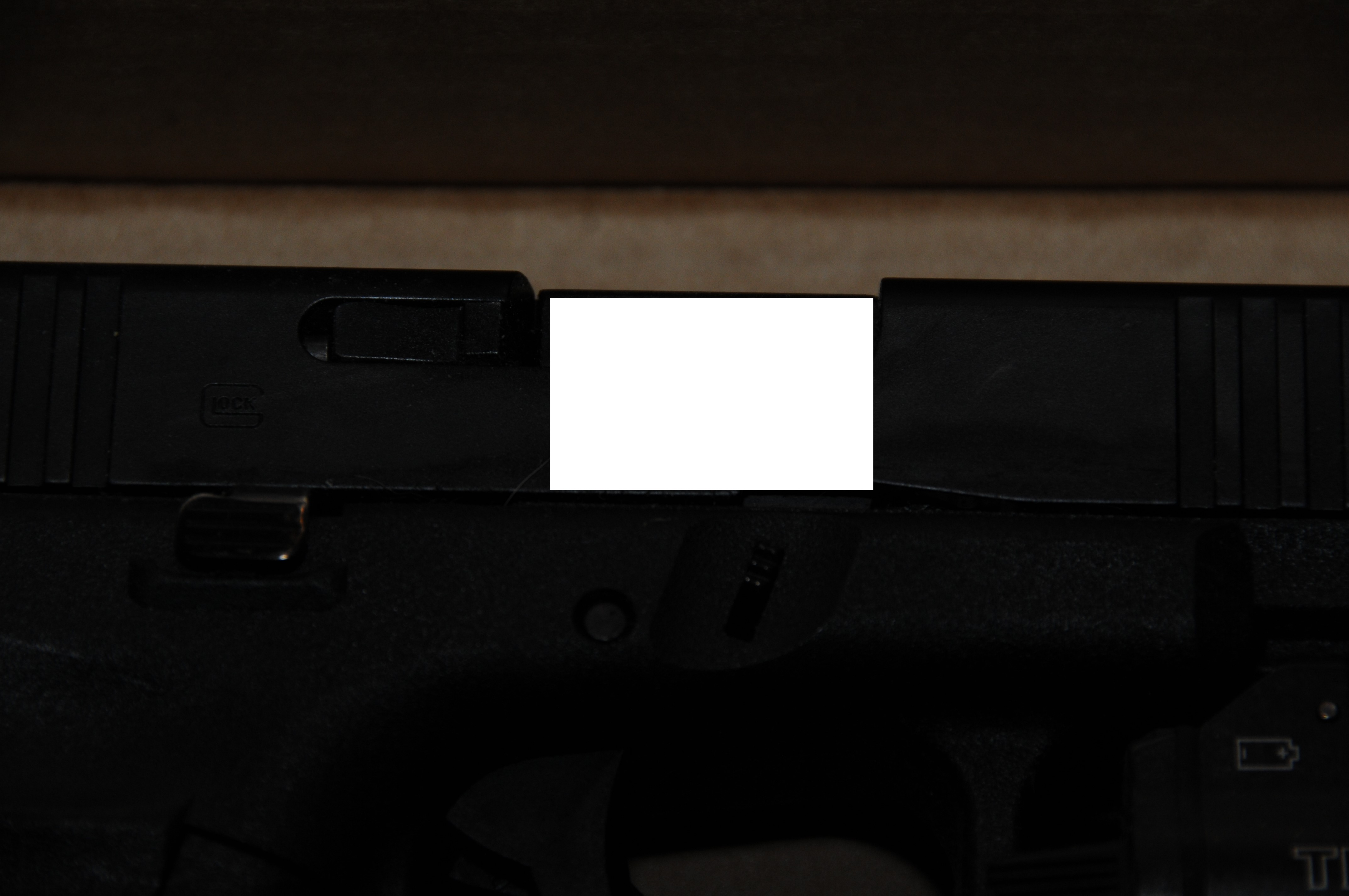


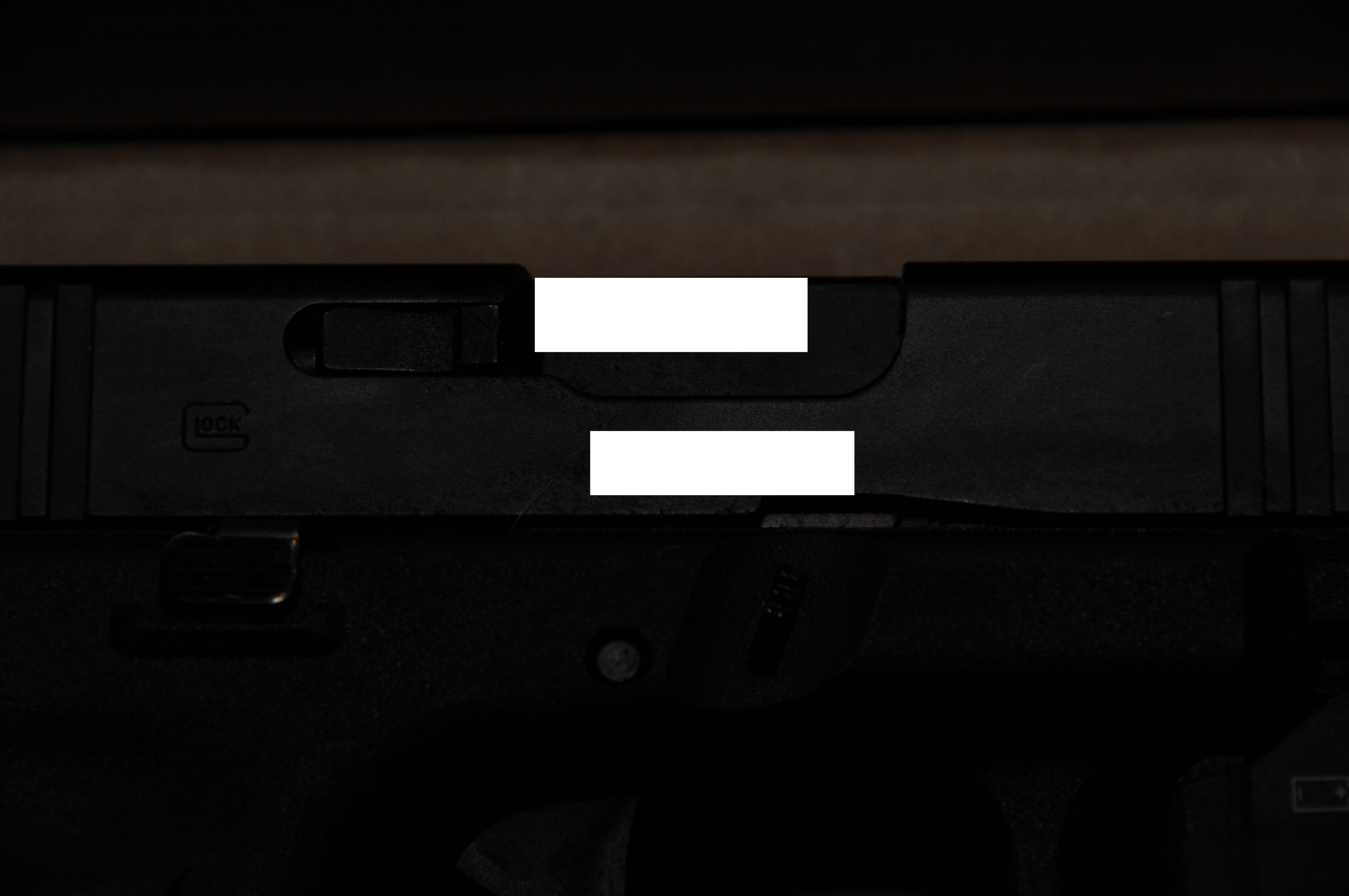






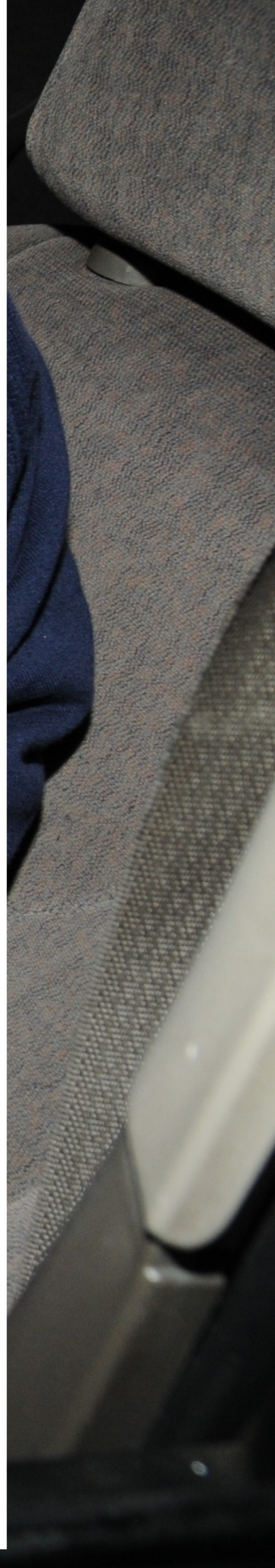






LOCK





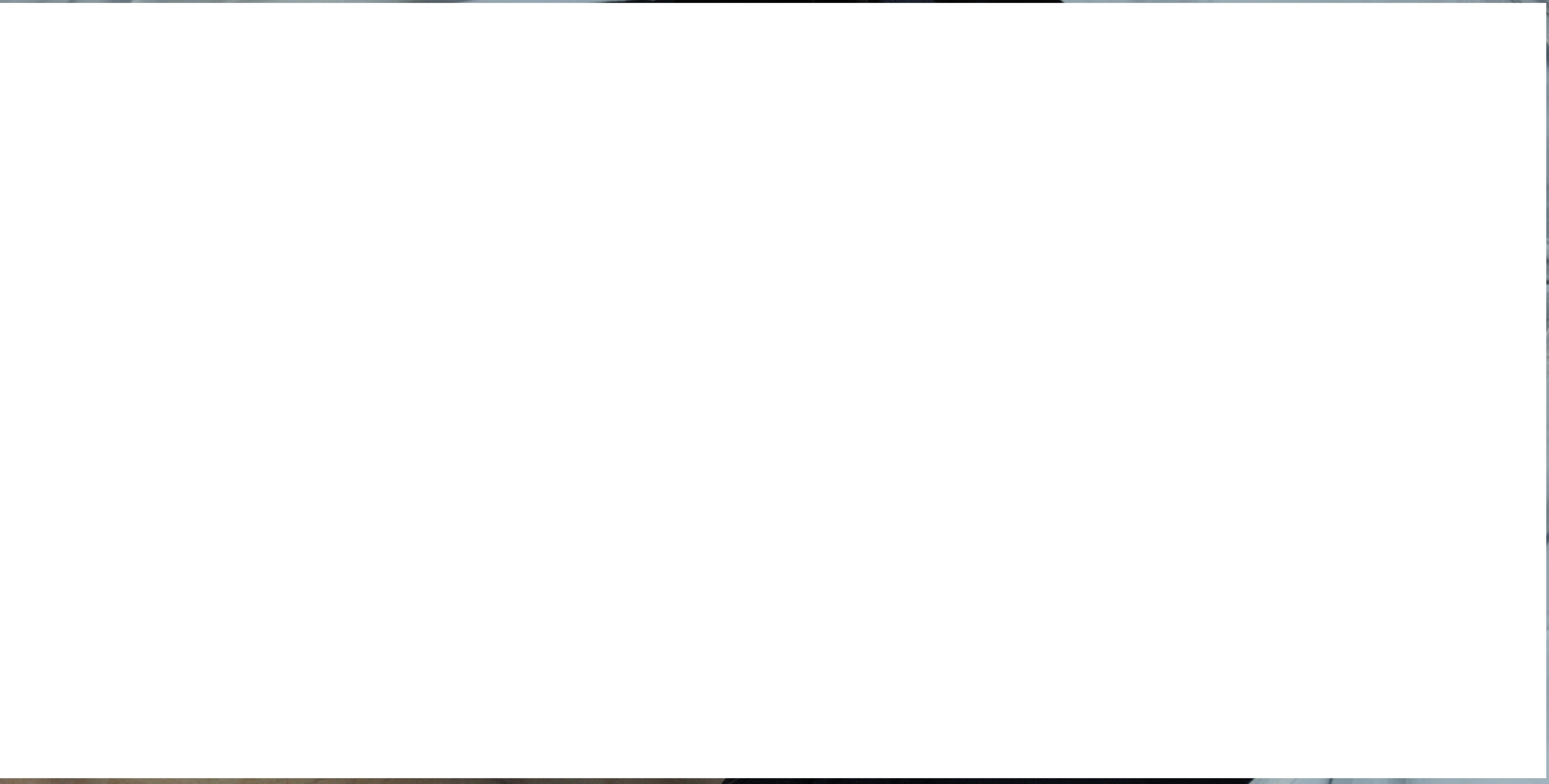


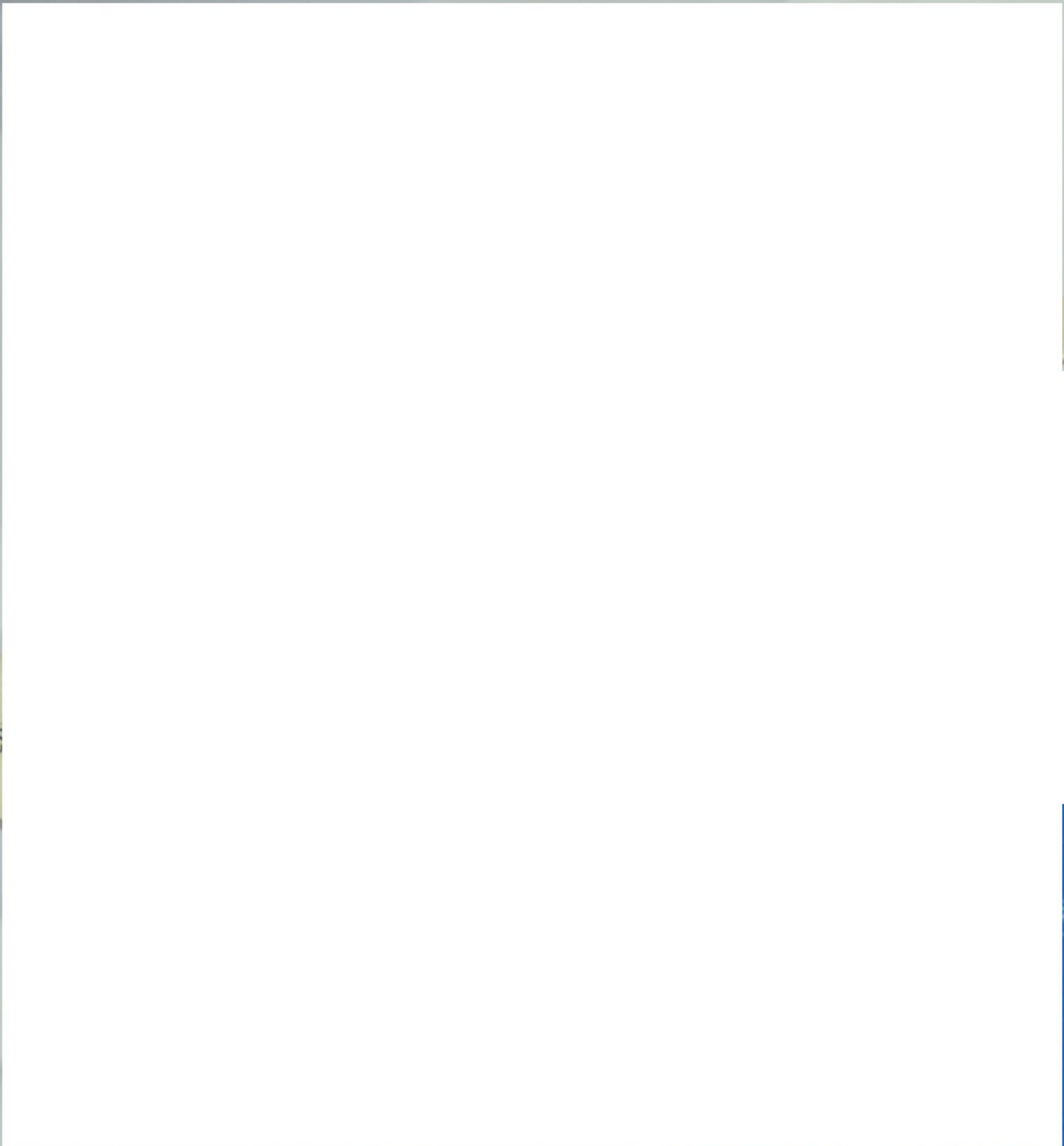




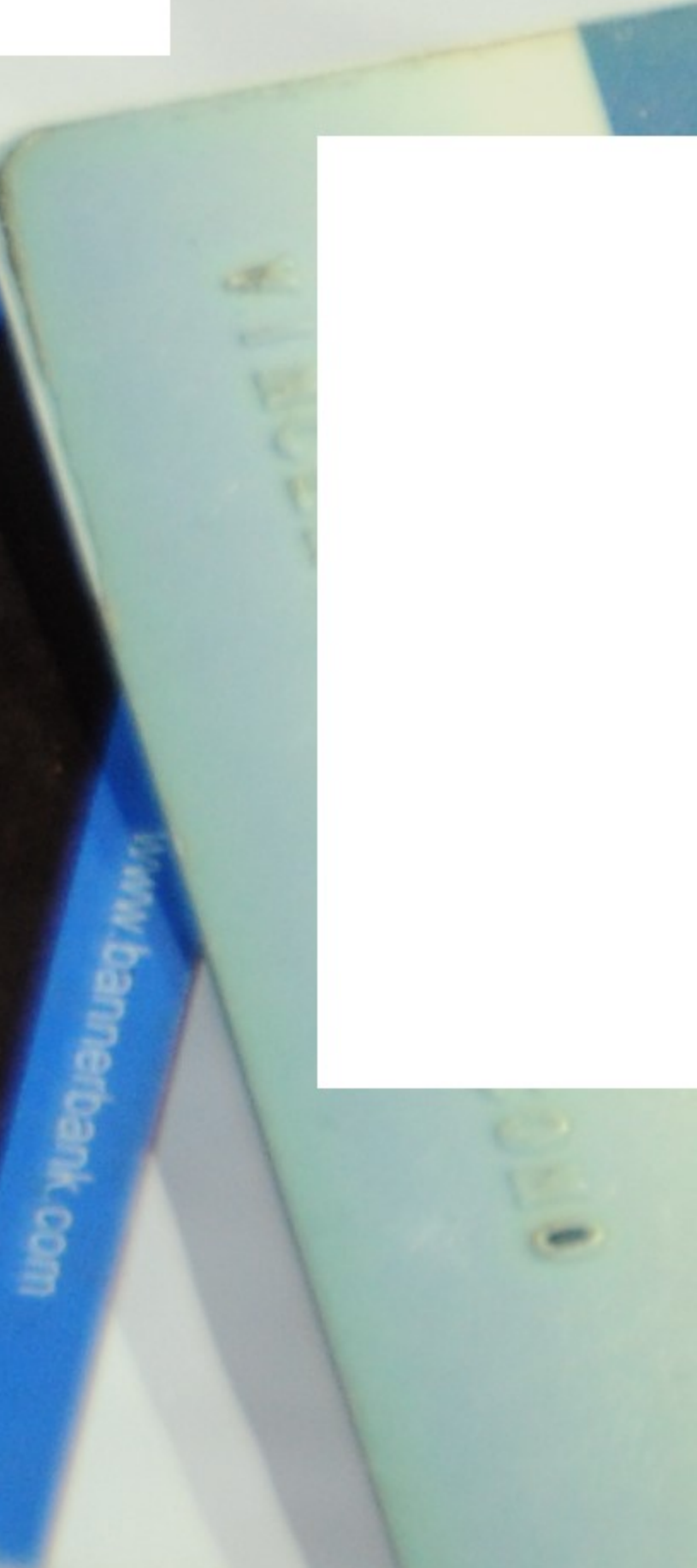
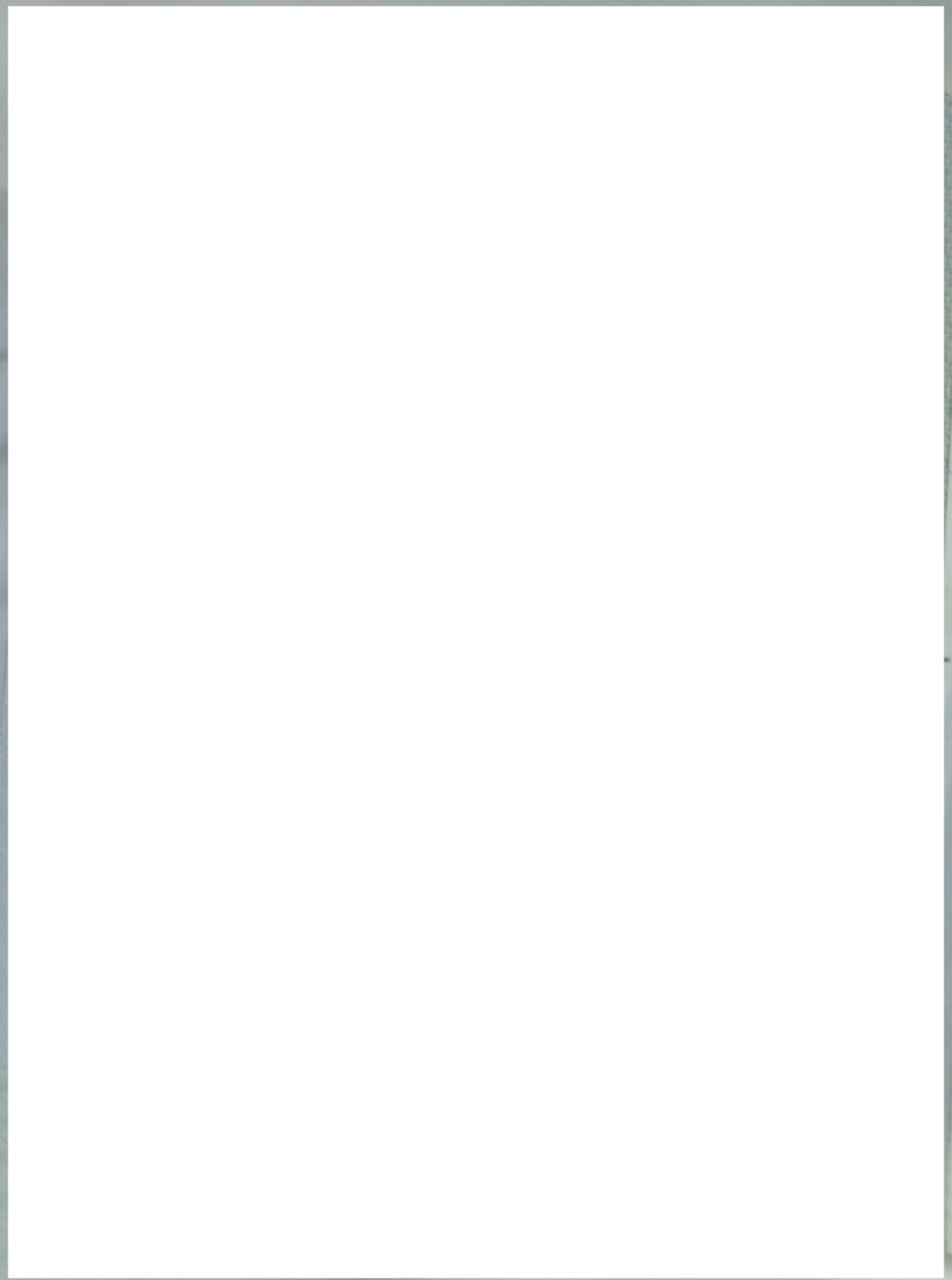
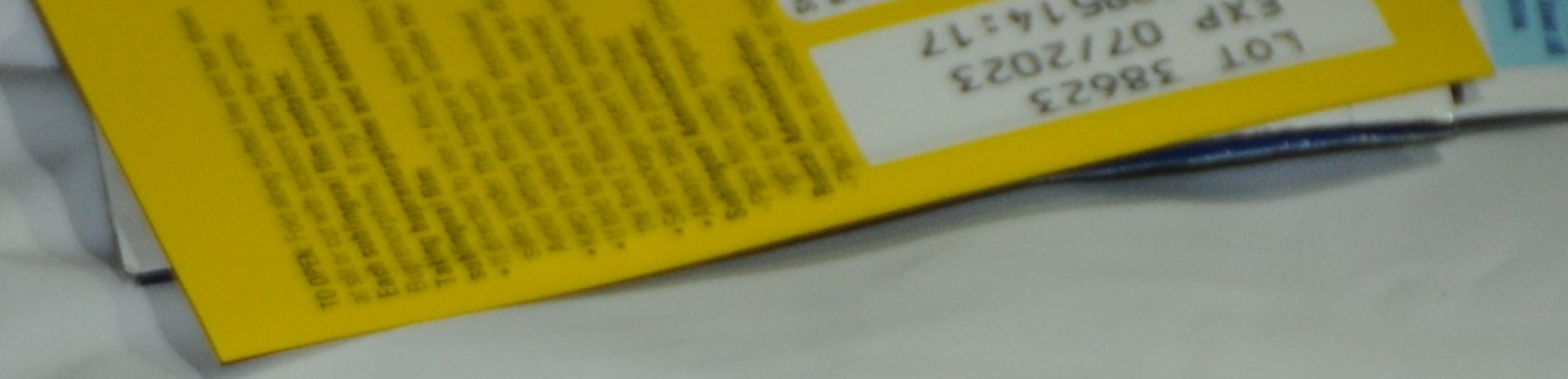




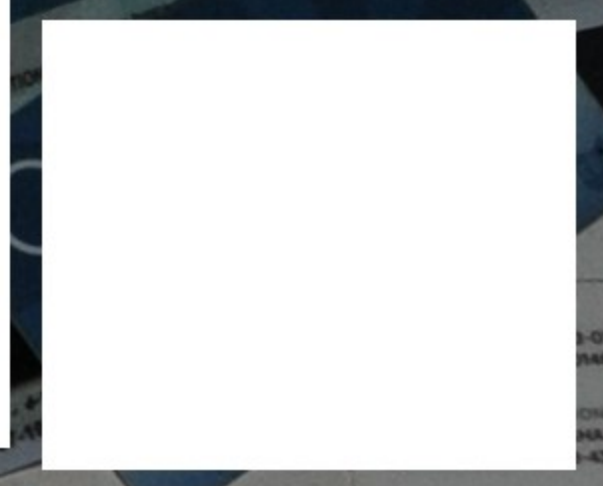
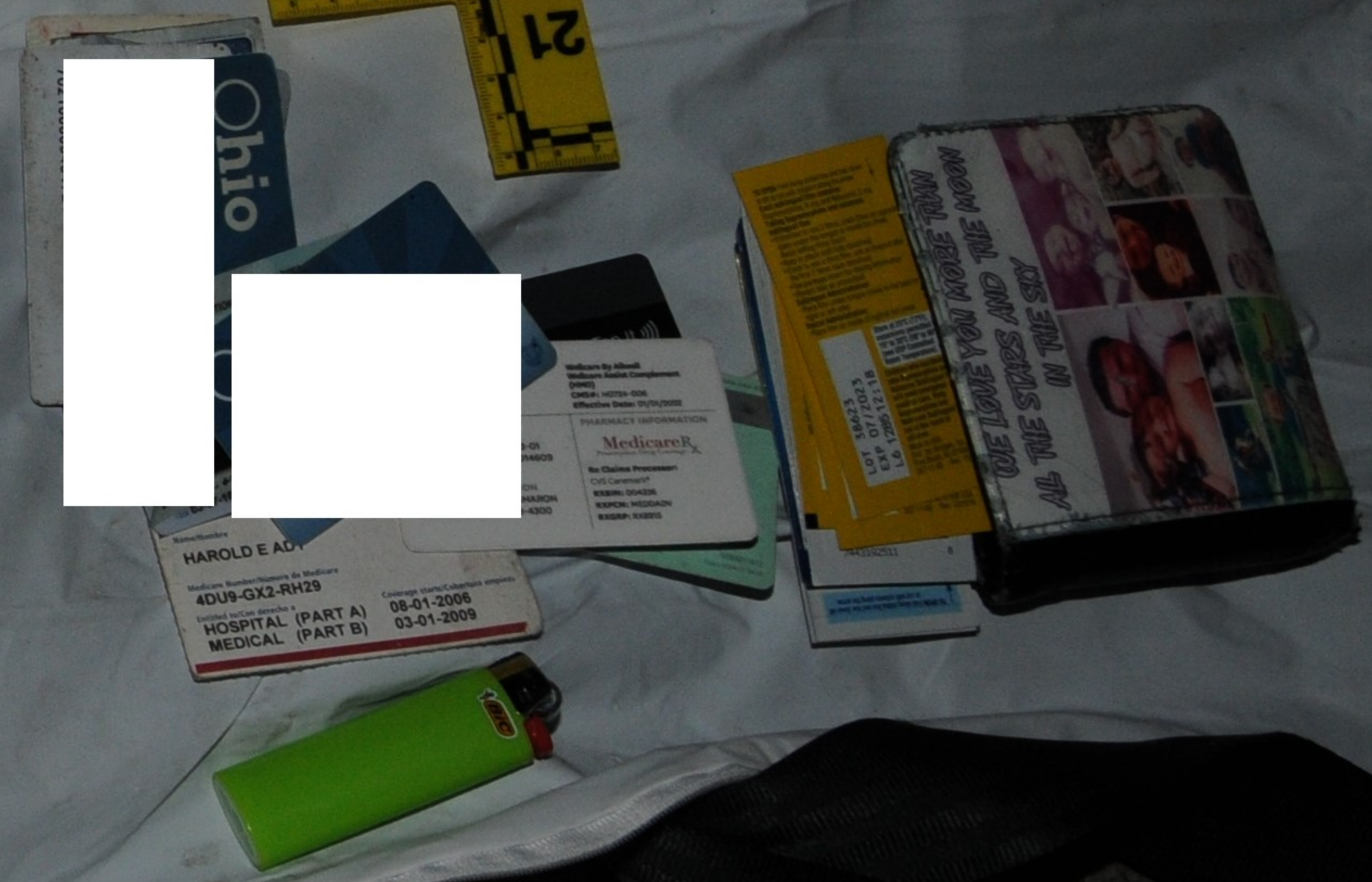
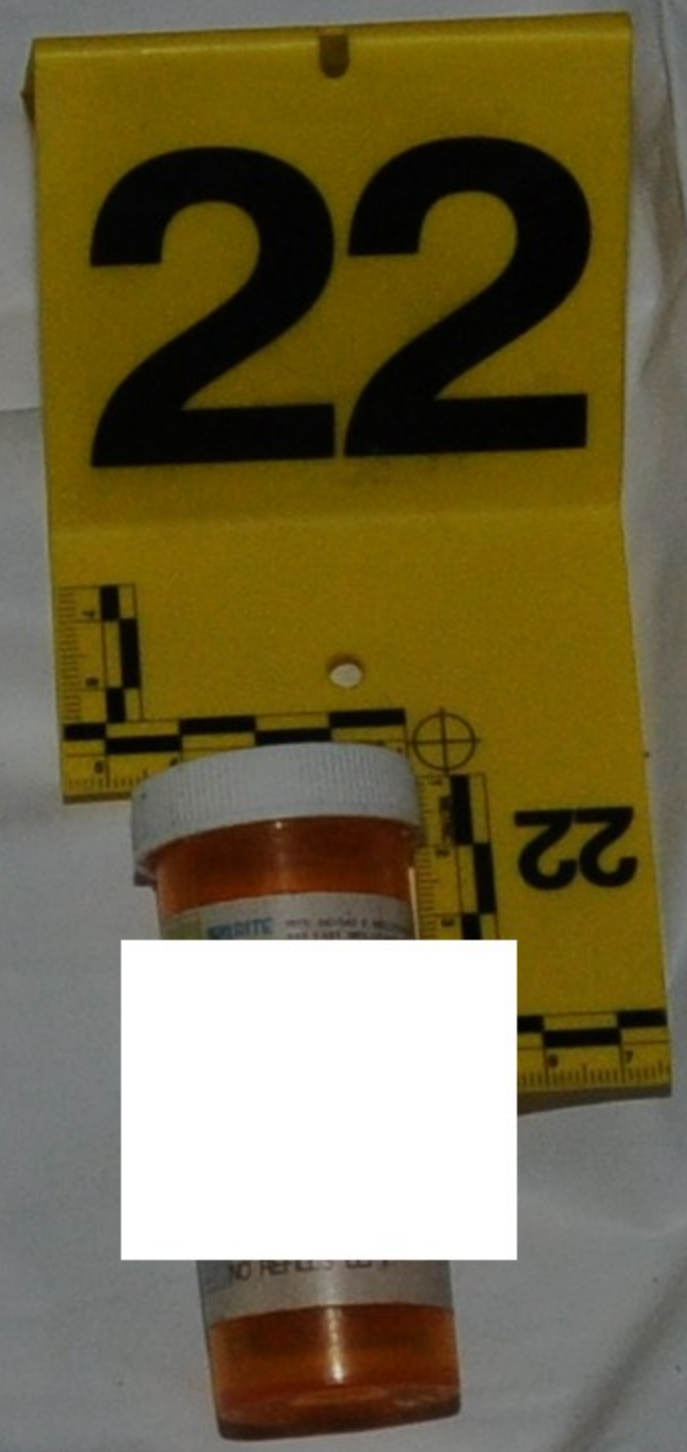


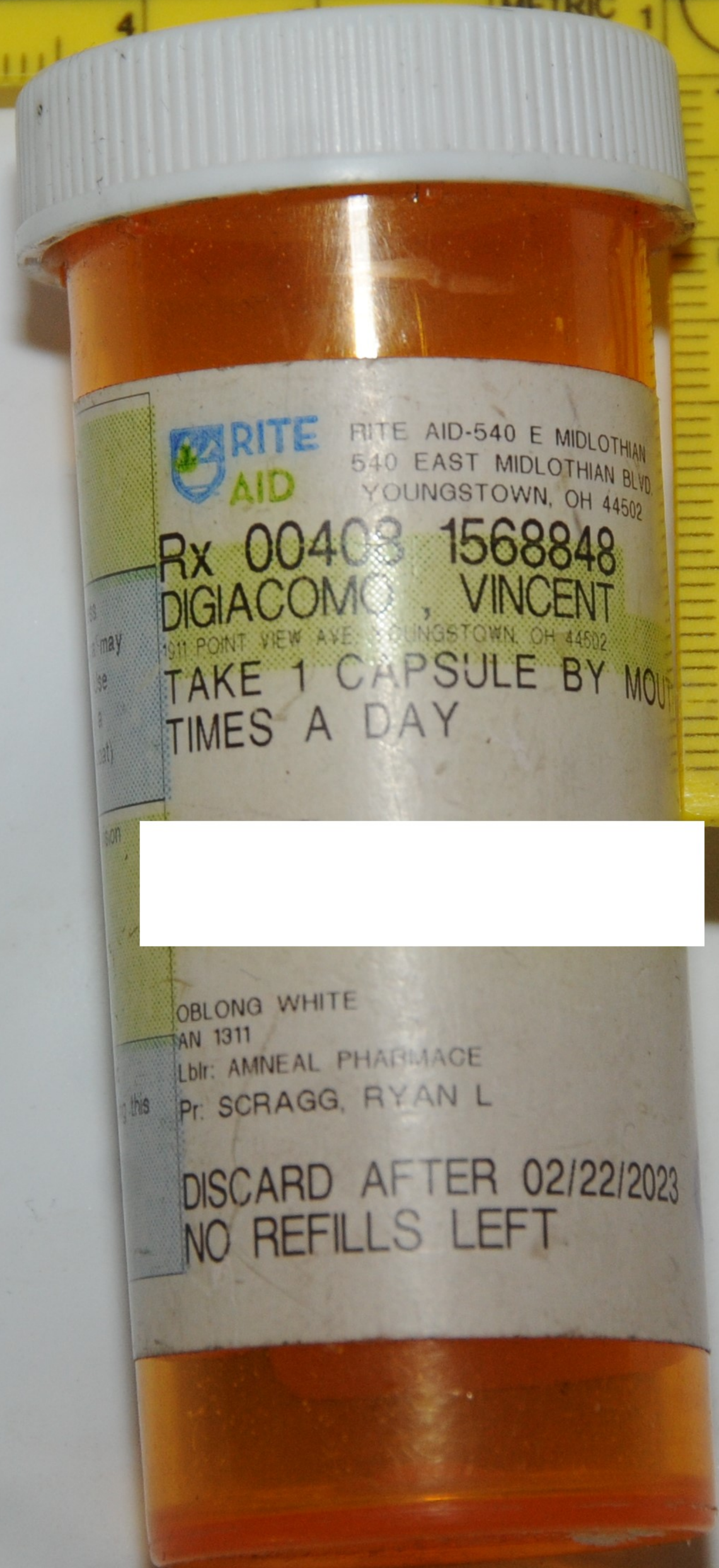












RITE AID RITE AID-540 E MIDLOTHIAN
540 EAST MIDLOTHIAN BLVD
YOUNGSTOWN, OH 44502

Rx 00403 1568848
DIGIACOMO, VINCENT

1611 POINT VIEW AVE YOUNGSTOWN, OH 44502
TAKE 1 CAPSULE BY MOUTH
TIMES A DAY



OBLONG WHITE
NAN 1311
Lbtr: AMNEAL PHARMACE
Pr: SCRAGG, RYAN L

DISCARD AFTER 02/22/2023
NO REFILLS LEFT

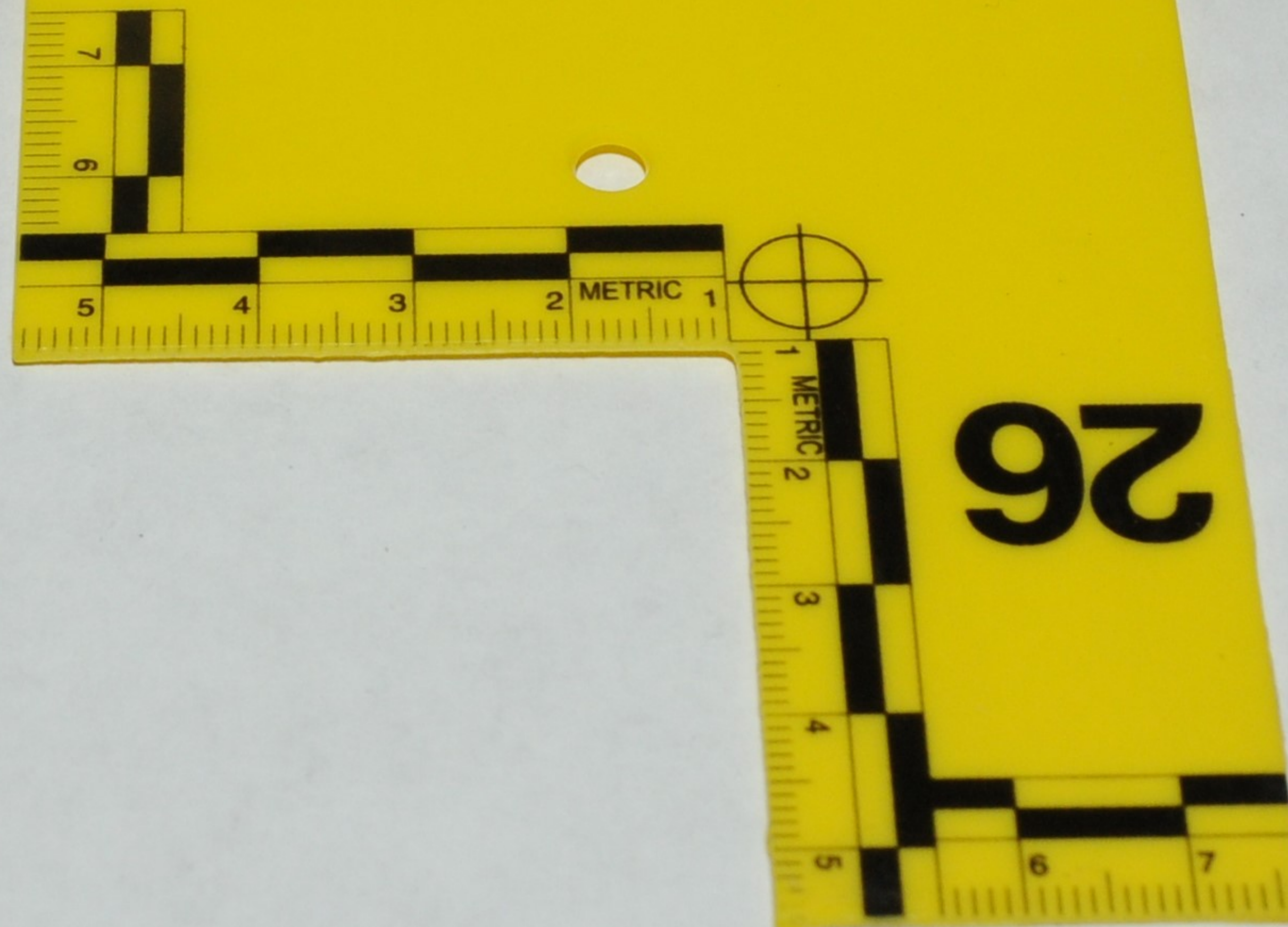


CAPT. HAUS
STRETHOUSE PD
GLOCK 45 9x19



(1) CHAMBER
(17) MAG.

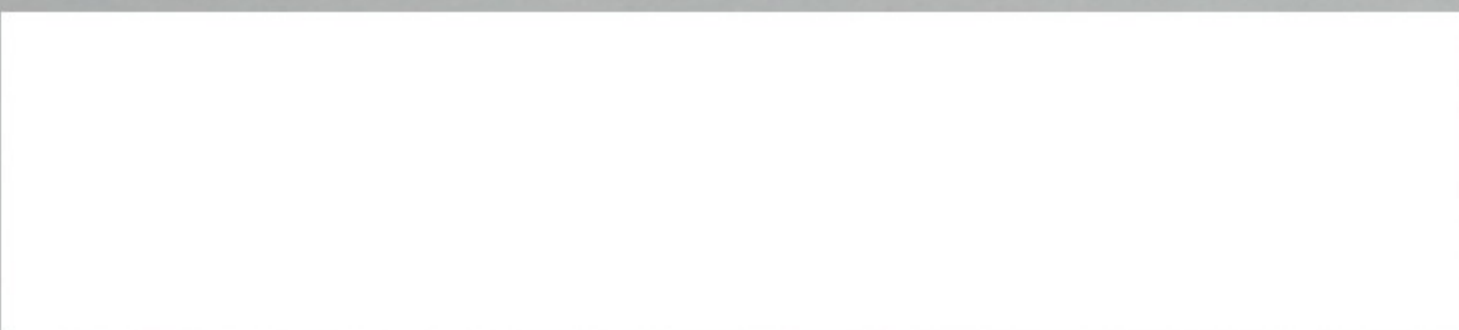
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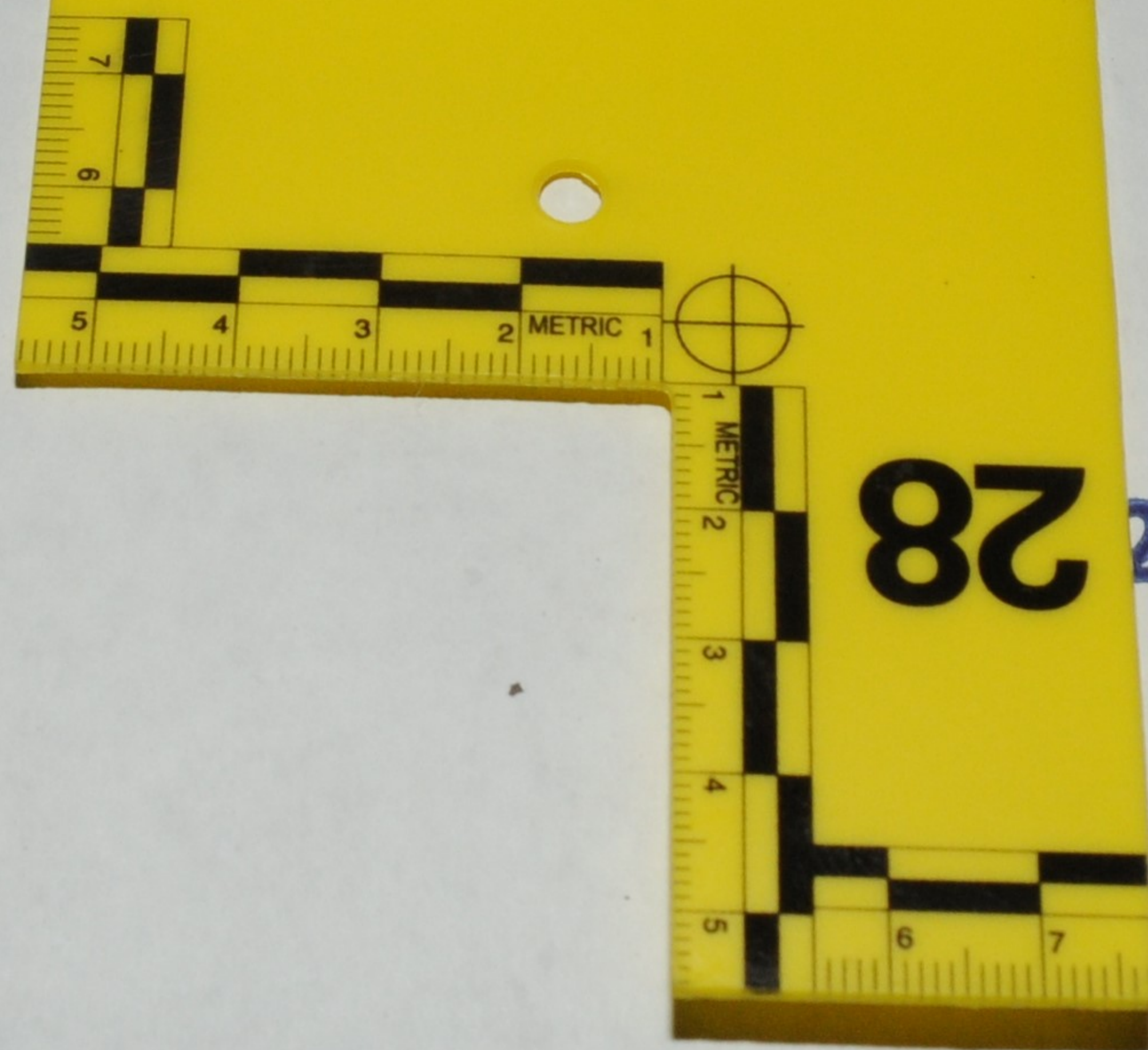
25 - Gun Boxes -
Item #4051-BL

EVIDENCE
www.ShopEVIDENCE.com
1-800-570-8288

PTL R.T. SCHNEEMAN
STRAUTERS PD
GLOCK 45 4219



28



28

25 - Gun Boxes - Blank
Item #4051-BLANK

EVIDENT

www.ShopEVIDENT.com
1-800-576-7606



5x 20.00
100.00

5x 20.00
100.00

4x 5.00
20.00

1x 10.00
10.00

1x 3.00

5x 2.00
10.00

5x 2.00
10.00



NDC 12496-1208-1
Buprenorphine and Naloxone Sublingual Film
8mg/2mg

CALIFORNIA
P-EBT 2.0
70210000484724

www.bankofamerica.com
debit
For Customer Service: 800-368-5212 (Outside the U.S.)
JAMES U SHEETS

SOCIAL SECURITY
HAROLD EUGENE MICHAEL
ADVISE
12/06/2021

Ohio
Direction Card

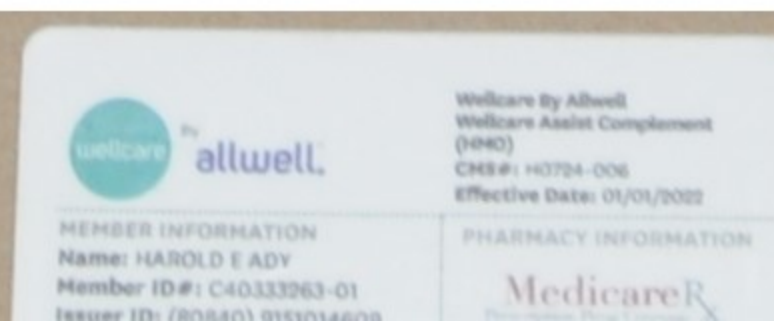
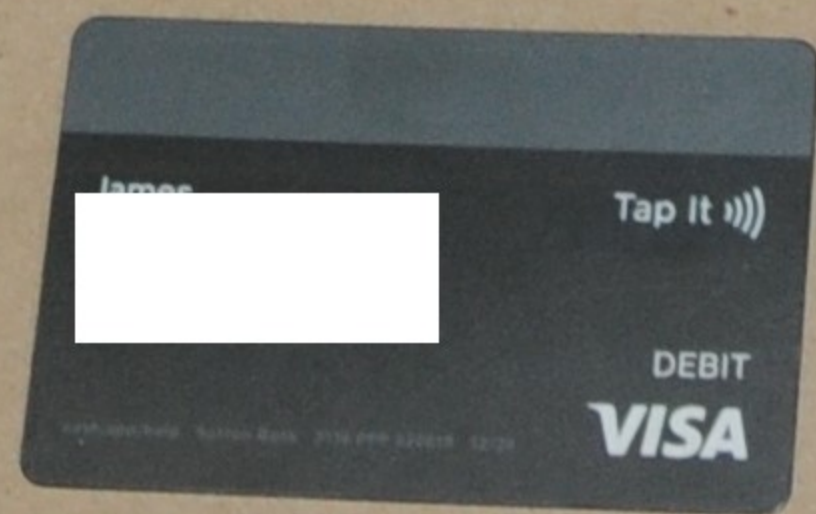
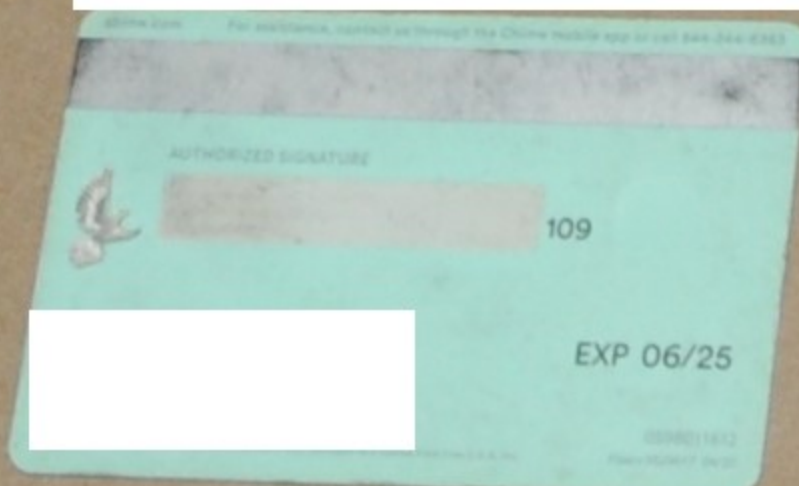
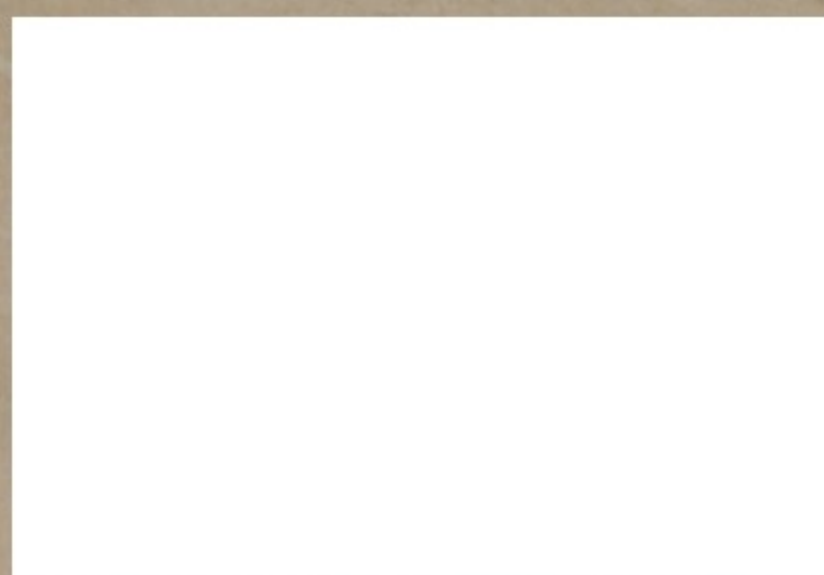
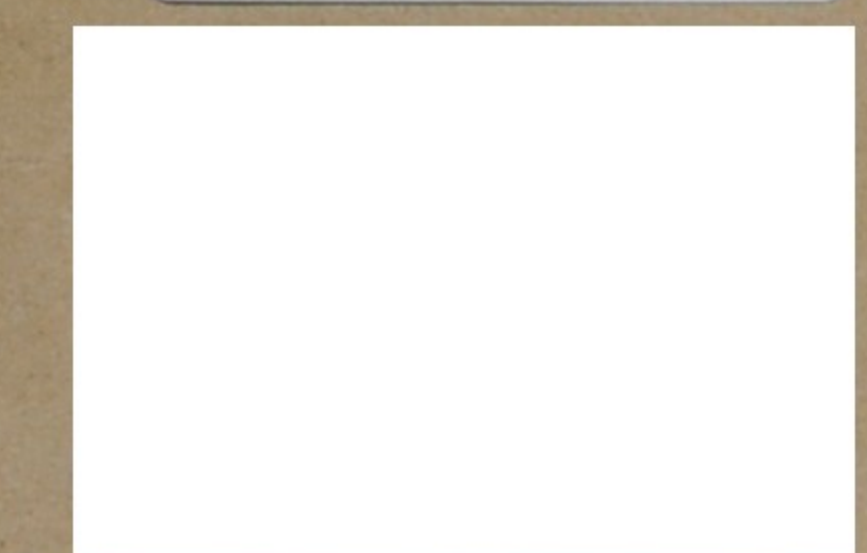
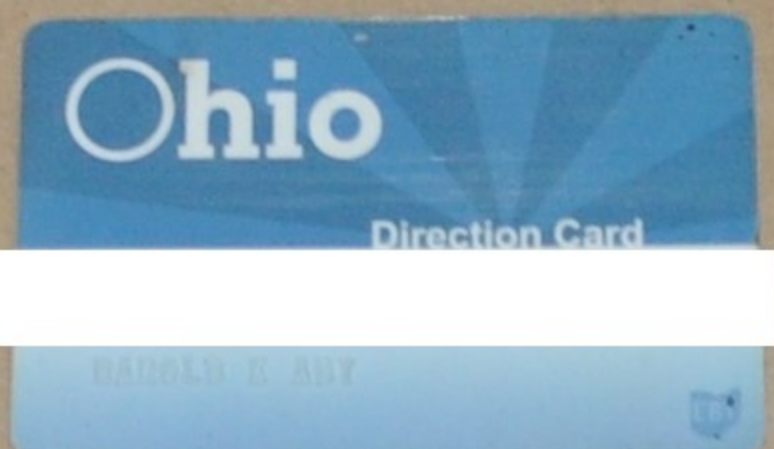
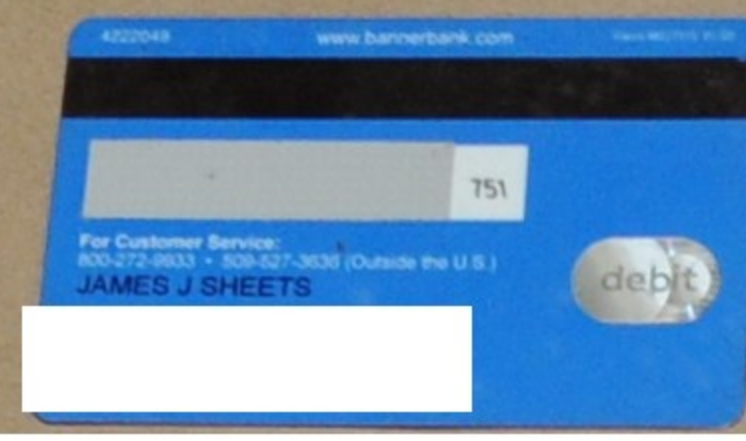
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EXP 06/25

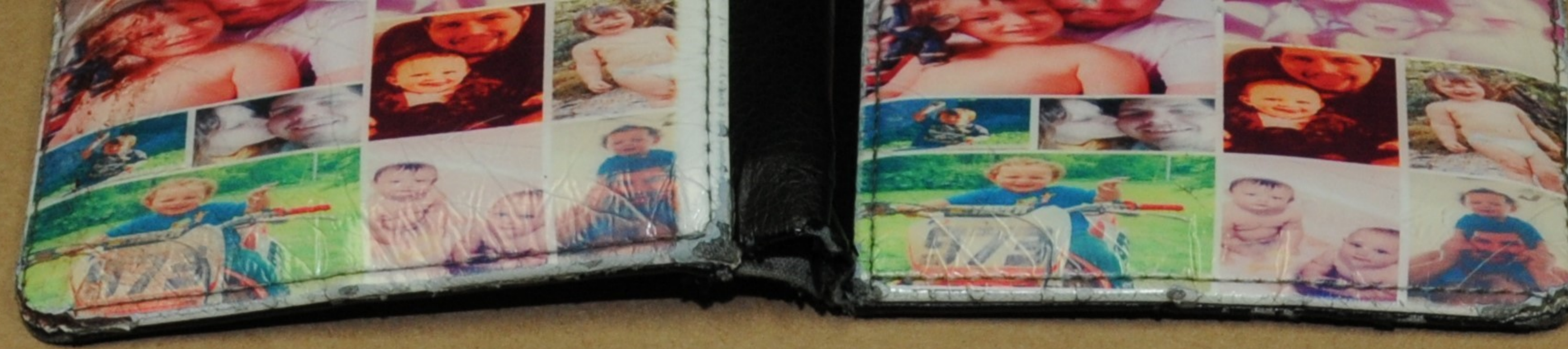
James
Tap It
DEBIT
VISA

allwell
Withcare By Allwell
Withcare Assist Complement
DSCR7
CARE #: 40793-106
Effective Date: 01/01/2022

Ohio
Direction Card

allwell
MEMBER INFORMATION
Name: HAROLD E MICHAEL
PARTNERSHIP INFORMATION

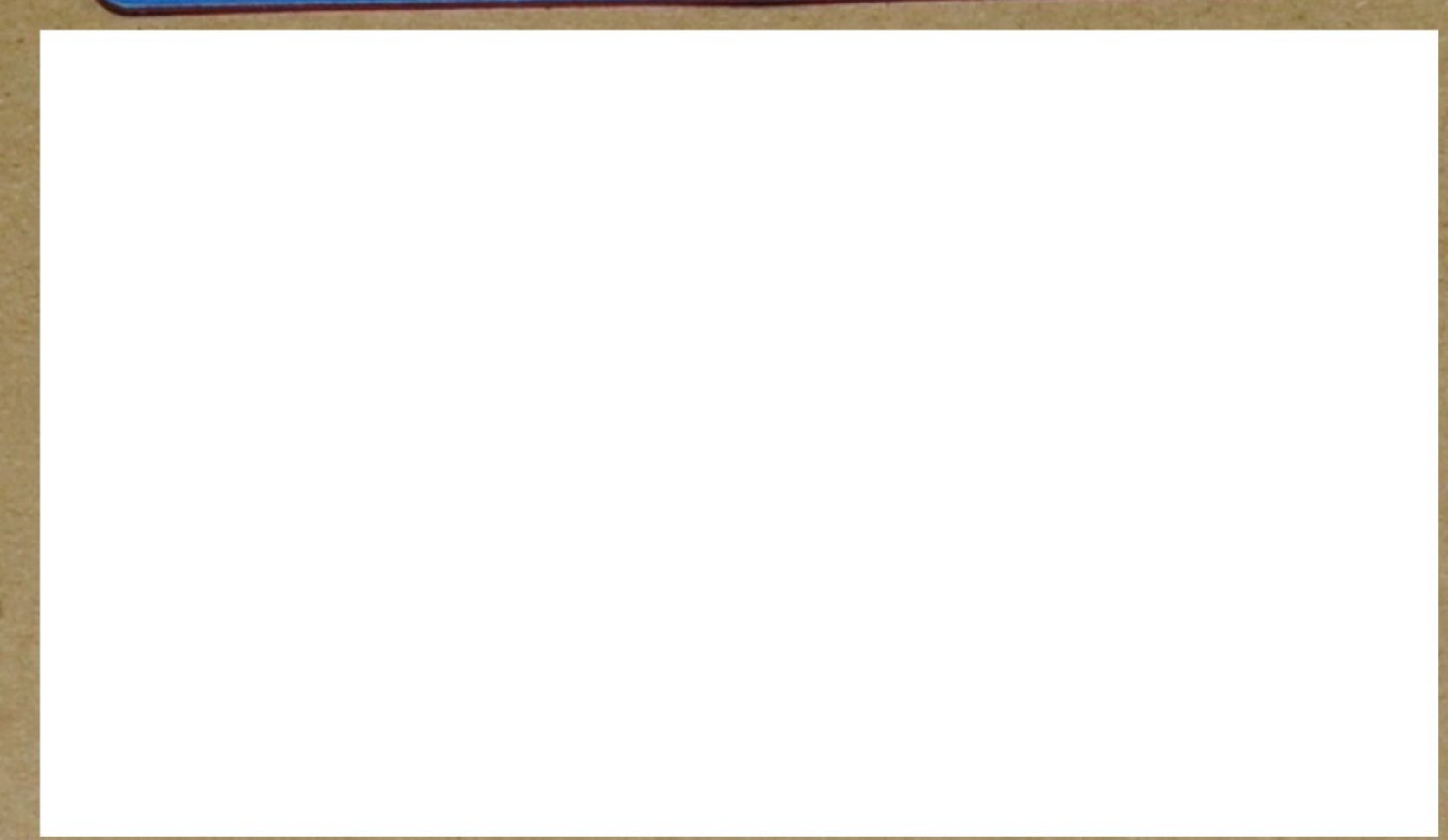
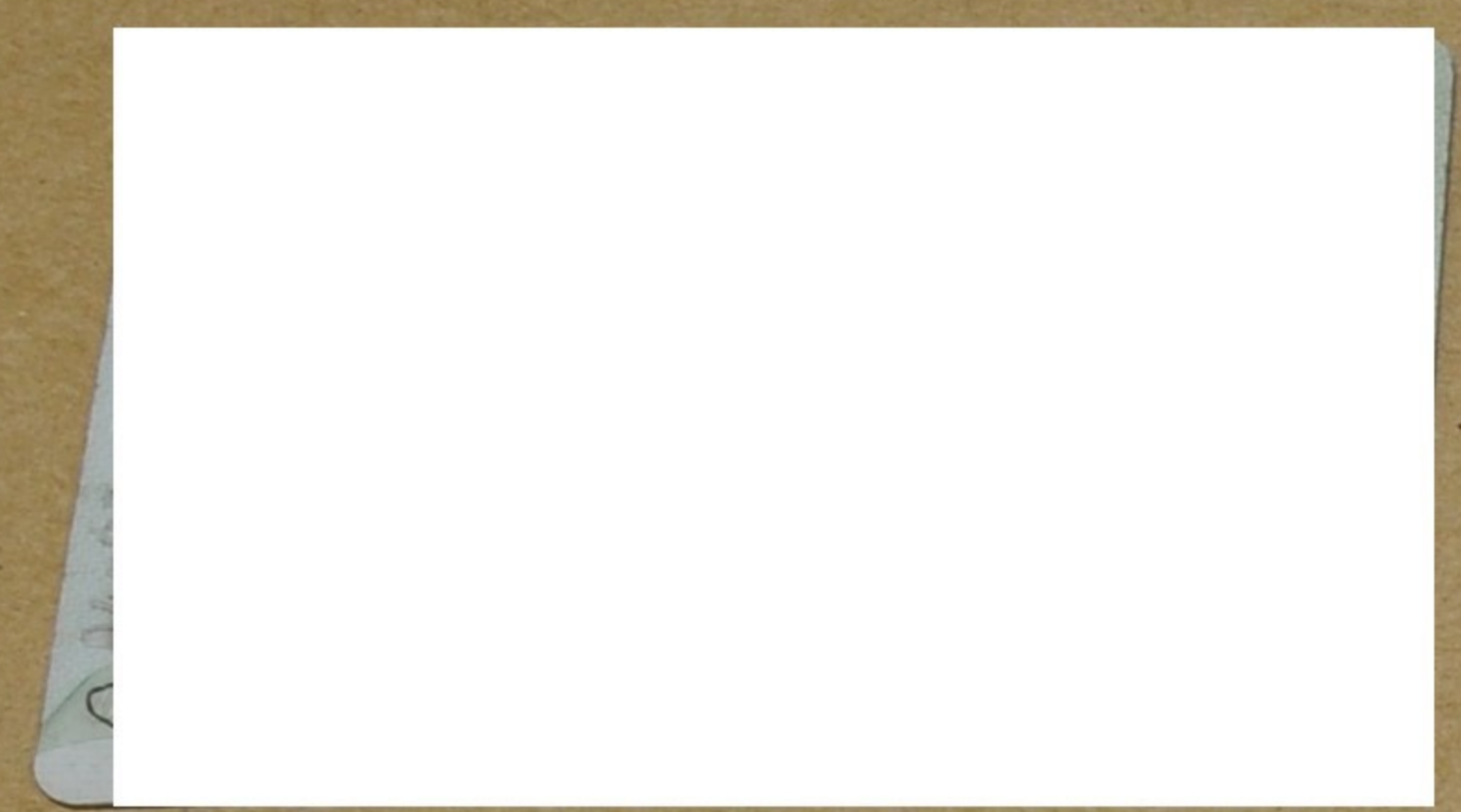




CALIFORNIA
 P-EBT 2.0
 [Redacted]
 ROHN, MONTE
 702100000484724

4222049 www.bannerbank.com
 751
 For Customer Service:
 800-272-9933 • 509-527-3636 (Outside the U.S.)
 JAMES J SHEETS
 debit

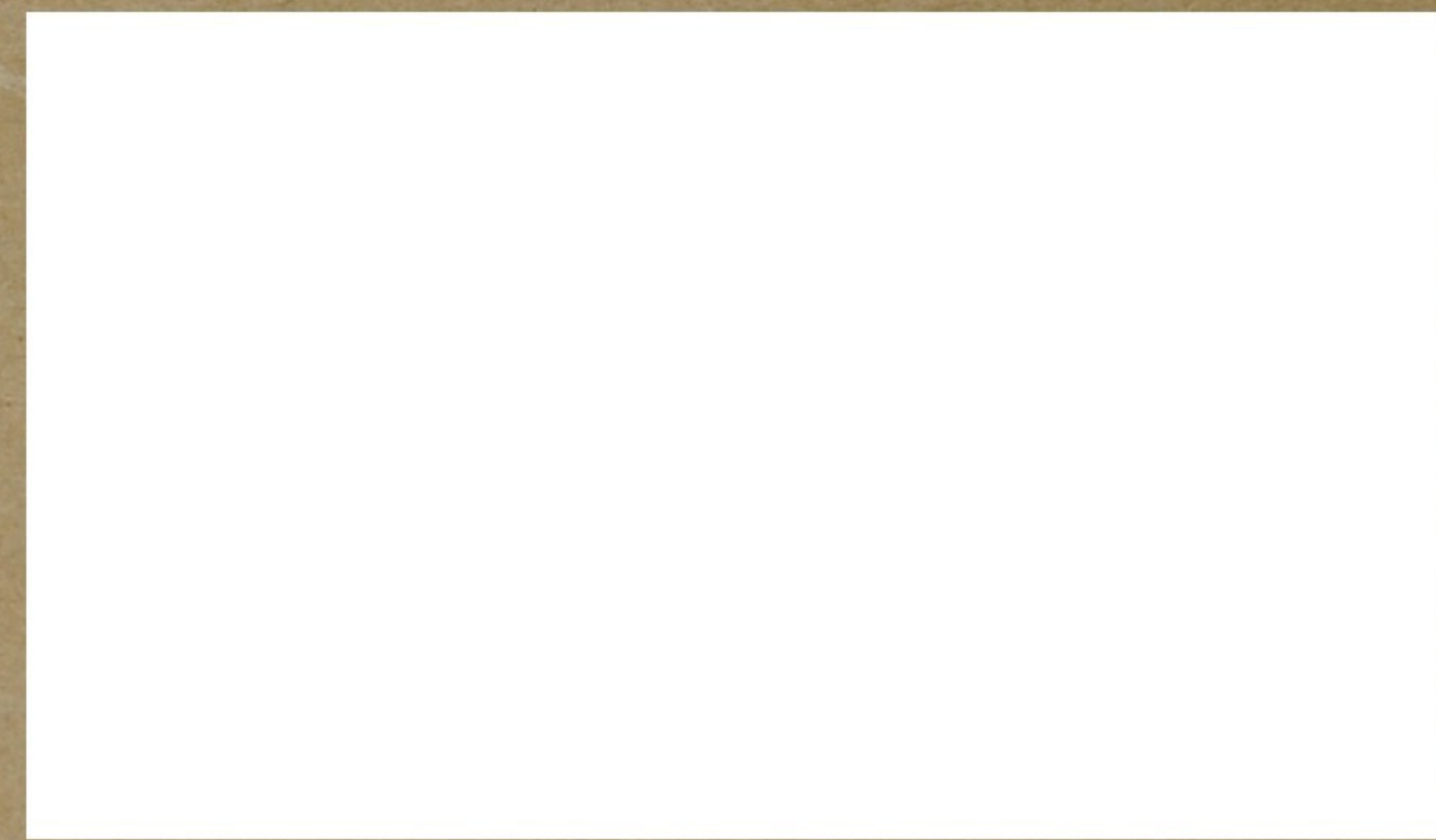
SOCIAL SECURITY
 THIS CARD IS FOR
 HAROLD EUGENE MICHAEL ADY
 ADMINISTRATIVE
 SIGNATURE 12/06/2021



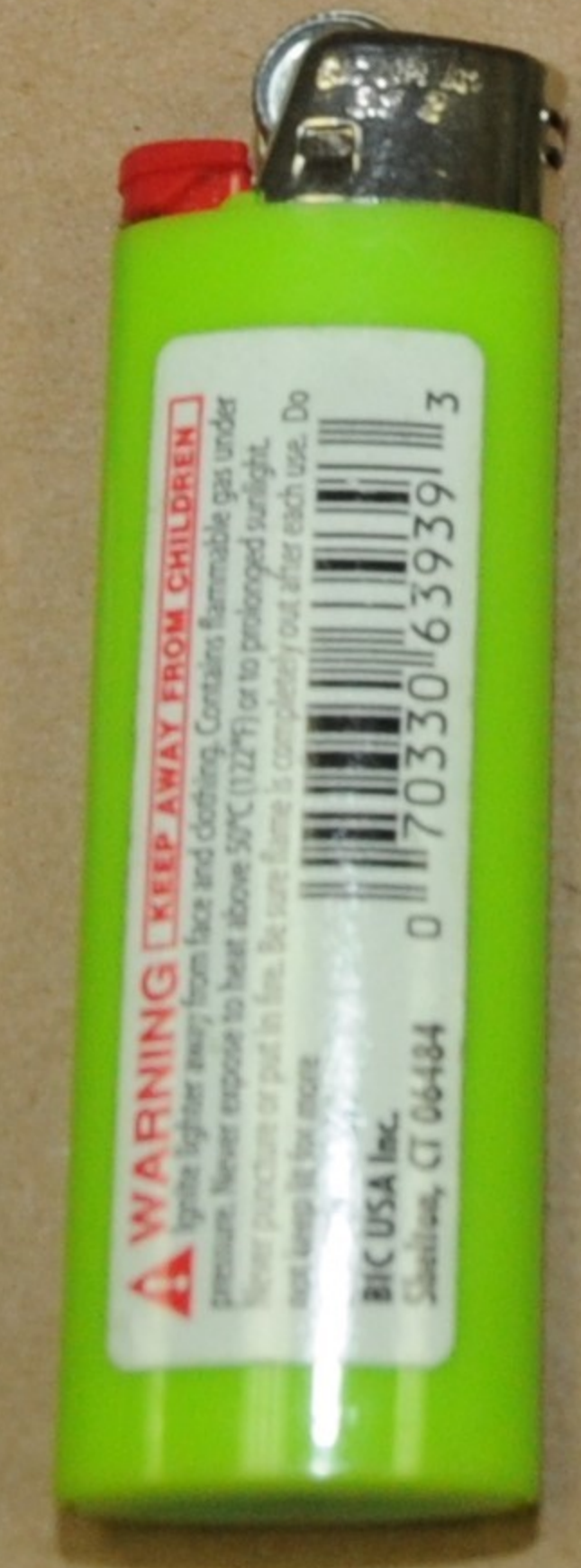
Ohio
 Direction Card
 [Redacted]
 HAROLD E ADY

chime.com For assistance, contact us through the Chime mobile app or call 844-244-6363
 AUTHORIZED SIGNATURE
 [Redacted] 109
 [Redacted]
 EXP 06/25
 VINCENT DIGIACOMO
 0598011612

James
 [Redacted]
 Tap It)))
 DEBIT
 VISA
 cash.app/help Sutton Bank 7116 PPP 520819 12/20



Ohio
 Direction Card
 [Redacted]
 VINCENT J DIGIACOMO



wellcare By allwell.
 Wellcare By Allwell
 Wellcare Assist Complement (HMO)
 CMS#: H0724-006
 Effective Date: 01/01/2022

MEMBER INFORMATION
 Name: HAROLD E ADY
 Member ID #: C40333263-01
 Issuer ID: (80840) 9151014609

PHARMACY INFORMATION
 MedicareRx
 Prescription Drug Coverage

Rx Claims Processor:
 CVS Caremark®
 RXBIN: 004336
 RXPCN: MEDDADV
 RXGRP: RX8915

PROVIDER INFORMATION
 PCP Name: GEORGE, SHARON
 PCP Phone: 1-330-898-4300

MEDICARE HEALTH INSURANCE
 Name/Nombre
 HAROLD E ADY
 Medicare Number/Numero de Medicare
 4DU9-GX2-RH29
 Entitled to/Con derecho a
 HOSPITAL (PART A) Coverage starts/Cobertura empieza
 08-01-2006

x16

K507896

04/08/19

AMOUNT T

-43.90 Y

-43.90

-3.18

Receipt - Ticket # 466834090
APPROVED

Yonkstown Auto Wrecking
14 Yonkstown Ave
Yonkstown, OH 4506
(330) 743-1452

Date: 5/19/2020 2:27:22 PM (ET)
PaymentType: Credit Card (Card Present)
BrandType: VISA
TransType: FORCE
Name: LLOYD
Card Number: [REDACTED]
Merchant ID: 520017575307001
Clerk: FHALT
Auth Code: 055342
Processor ID#: FTR:106448030
Invoice #: 187269

Device: WKS10000
Terminal: 001
Entry: Keyed
Amount: \$42.90 USD

CARDMEMBER ACKNOWLEDGES RECEIPT OF
GOODS AND/OR SERVICES IN THE AMOUNT OF
THE TOTAL SHOWN HEREON AND AGREES TO
PERFORM THE OBLIGATIONS SET FORTH BY
THE CARDMEMBER'S AGREEMENT WITH ISSUER

SIGNATURE _____