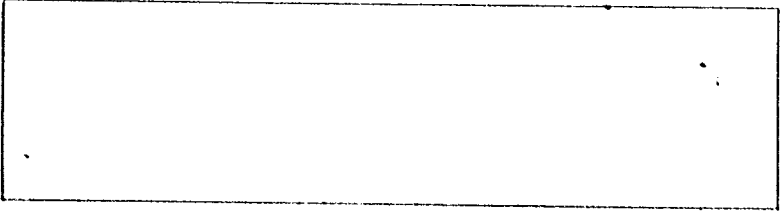


SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH
P. O. Box 485
Columbia, South Carolina 29202

FOR MAINTENANCE AND MEDICAL CARE OF: Phillip A. Durham, #007-30-2597

- | | |
|---|--|
| <input checked="" type="checkbox"/> At S. C. State Hospital | <input type="checkbox"/> C. M. Tucker Human Resources Center |
| <input type="checkbox"/> At Crafts-Farrow State Hospital | <input type="checkbox"/> Morris Village |
| <input type="checkbox"/> At William S. Hall Psychiatric Institute | |



June 18, 1973 through July 27, 1973 @ \$6.00 per day	\$ 234.00
May 9, 1974 through June 13, 1974 @ \$13.00 per day	455.00
August 26, 1975 through October 4, 1975 @ \$13.00 per day	507.00
October 5, 1975 through November 23, 1975 @ \$13.00 per day	637.00
November 30, 1975 through December 15, 1975 @ \$13.00 per day	195.00
April 20, 1977 through August 23, 1977 @ \$13.00 per day	1,625.00
August 23, 1977 through September 13, 1977 @ \$20.00 per day	420.00
September 13, 1977 through September 21, 1977 @ \$13.00 per day	104.00
October 2, 1977 through October 20, 1977 @ \$13.00 per day	234.00
September 20, 1979 through October 18, 1979 @ \$13.00 per day	364.00
October 22, 1979 through December 2, 1979 @ \$13.00 per day	533.00
	\$ 5,308.00

STATE OF SOUTH CAROLINA)
COUNTY OF RICHLAND)

Before me personally appeared (Mrs.) Donna P. Thompson who being duly sworn, says that ~~he~~/she is Assistant Director, Patients Personal Affairs of the State Department of Mental Health and that the above account is true of ~~his~~/her own knowledge and that no part thereof has been paid by cash, discount or otherwise and that there is now due and owing the State Department of Mental Health the sum of \$5,308.00 and that ~~he~~/she is the proper officer to make this verification.

Donna P. Thompson

Sworn to and subscribed before me
Lynda Elder Ferguson
this 1st day of July, 1980.

Lynda Elder Ferguson
Notary Public for South Carolina
My Commission Expires August 9, 1980
REV SEPT 78 F-50 RECORDED JUL 8 1980