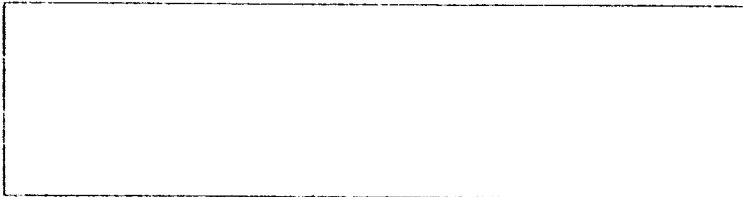


SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH
P. O. Box 485
Columbia, South Carolina 29202

FOR MAINTENANCE AND MEDICAL CARE OF: Christian Johnson, #007-81-7211

- | | |
|---|--|
| <input 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 checked="" type="checkbox"/> Morris Village |
| <input type="checkbox"/> At William S. Hall Psychiatric Institute | |

BOOK 1 PAGE 607



April 5, 1978 to June 23, 1978 @ \$25.00 Per Day	\$1,975.00
Less Amount Received	1,777.50
Balance Due	\$ 197.50

STATE OF SOUTH CAROLINA)
COUNTY OF RICHLAND)

Before me personally appeared (Mrs.) Beverly R. Black who being duly sworn, says that ~~he~~/she is Office Manager, 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 \$197.50 and that ~~he~~/she is the proper officer to make this verification.

Beverly R. Black

Sworn to and subscribed before me
Lynda Elder Ferguson
this 24th day of September 1980.

Lynda Elder Ferguson
Notary Public for South Carolina

SCDMH FORM F-50 My commission expires August 9, 1989

9678