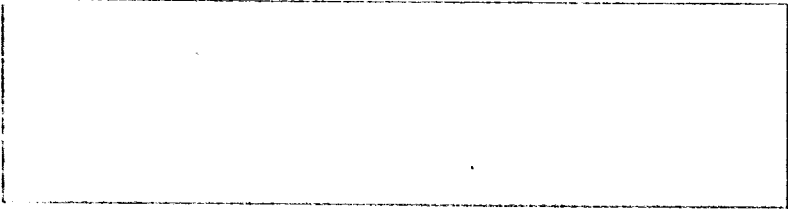


SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH
P. O. Box 485
Columbia, South Carolina 29202

FOR MAINTENANCE AND MEDICAL CARE OF: Nellie B. Sullivan, #007-40-1042

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



May 15, 1962 to June 30, 1962 @ \$60.00 Per Month	\$ 92.90
July 1, 1962 to September 6, 1962 @ \$75.00 Per Month	165.00
March 30, 1965 to April 30, 1965 @ \$75.00 Per Month	79.84
April 1, 1967 to May 4, 1967 @ \$90.00 Per Month	101.61
July 19, 1968 to September 14, 1968 @ \$3.50 Per Day	203.00
February 14, 1970 to April 12, 1970 @ \$3.50 Per Day	203.00
October 4, 1971 to November 19, 1971 @ \$3.50 Per Day	161.00
July 17, 1972 to August 19, 1972 @ \$6.00 Per Day	198.00
June 26, 1974 to August 6, 1974 @ \$13.00 Per Day	533.00
August 11, 1974 to November 11, 1974 @ \$13.00 Per Day	1,196.00
November 17, 1974 to December 2, 1974 @ \$13.00 Per Day	195.00
	\$3,128.35
Less Amount Paid	1,924.00
Balance Due	\$1,204.35

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 \$1,204.35 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 1st day of December 1980.

Lynda Elder Ferguson
Notary Public for South Carolina

My Commission expires August 9, 1989