

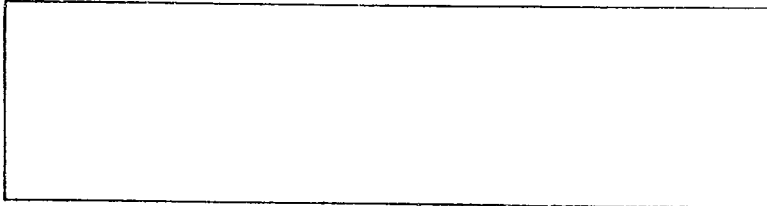
SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH
P. O. Box 485
Columbia, South Carolina 29202

FOR MAINTENANCE AND MEDICAL CARE OF:

Samuel Brooks, #007-40-1684 BOOK

1 PAGE 781

- | | |
|---|---|
| <input type="checkbox"/> At C. M. Tucker, Jr., Human Resources Center | <input type="checkbox"/> At James F. Byrnes Clinical Center |
| <input type="checkbox"/> At Crafts-Farrow State Hospital | <input checked="" type="checkbox"/> At S. C. State Hospital |
| <input type="checkbox"/> At Earle E. Morris, Jr., Alcohol and Drug Addiction Center | <input type="checkbox"/> At William S. Hall Psychiatric Institute |
| <input type="checkbox"/> At G. Werber Bryan Psychiatric Hospital | |



July 26, 1973 through December 3, 1973 @ \$6.00 per day	\$ 780.00
October 8, 1974 through November 30, 1974 @ \$13.00 per day	689.00
December 2, 1974 through December 13, 1974 @ \$13.00 per day	143.00
December 30, 1974 through January 10, 1975 @ \$13.00 per day	143.00
January 23, 1981 through March 13, 1981 @ \$15.00 per day	735.00
June 2, 1982 through July 2, 1982 @ \$15.00 per day	450.00
	<hr/>
	\$2,940.00
Less Amount Paid	<hr/>
	2,083.60
Balance Due	<hr/>
	\$ 856.40

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 as of 2/15/84 there is/was due and owing the State Department of Mental Health the sum of \$856.40 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 15th day of February 1984

Lynda Elder Ferguson
Notary Public for South Carolina

August 9, 1989

My commission expires on _____
at 3:00 P/M

25610