

SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH
P. O. BOX 485
COLUMBIA, SOUTH CAROLINA 29202

FOR MAINTENANCE AND MEDICAL CARE OF: CARLTON A. FAUBION BOOK #008-30-8525, (DECEASED)

1 PAGE 862

AT BYRNES MEDICAL CENTER

DECEMBER 28, 1983	THROUGH	JUNE 30, 1984	@ \$25.00 PER DAY	\$ 4,650.00
JULY 01, 1984	THROUGH	AUGUST 23, 1984	@ \$40.00 PER DAY	2,120.00
SEPTEMBER 06, 1984	THROUGH	SEPTEMBER 10, 1984	@ \$55.00 PER DAY	220.00
SEPTEMBER 10, 1984	THROUGH	OCTOBER 12, 1984	@ \$25.00 PER DAY	800.00
OCTOBER 12, 1984	THROUGH	OCTOBER 17, 1984	@ \$55.00 PER DAY	275.00
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LESS AMOUNT PAID				\$ 8,065.00
				2,900.00
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BALANCE DUE				\$ 5,165.00

STATE OF SOUTH CAROLINA
COUNTY OF RICHLAND

BEFORE ME PERSONALLY APPEARED (MRS.) BEVERLY R. BLACK WHO BEING DULY SWORN, SAYS THAT SHE IS OFFICE MANAGER, PATIENTS PERSONAL AFFAIRS OF THE STATE DEPARTMENT OF MENTAL HEALTH AND THAT THE ABOVE ACCOUNT IS TRUE OF HER OWN KNOWLEDGE AND THAT NO PART THEREOF HAS BEEN PAID BY CASH, DISCOUNT OR OTHERWISE AND THAT AS OF 03/22/85 THERE IS/WAS DUE AND OWING THE STATE DEPARTMENT OF MENTAL HEALTH THE SUM OF \$5,165.00 AND THAT SHE IS THE PROPER OFFICER TO MAKE THIS VERIFICATION.

Beverly R. Black

SWORN TO AND SUBSCRIBED BEFORE ME
LYNDA ELDER FERGUSON
THIS 22ND DAY OF MARCH 1985

Lynnda Elder Ferguson
NOTARY PUBLIC FOR SOUTH CAROLINA

MY COMMISSION EXPIRES ON AUGUST 9, 1989

Recorded March 27th, 1985 at 3:00 P/M

28484