

FOR MAINTENANCE AND MEDICAL CARE OF: LOVELY M. BAGWELL
#008-50-8318

AT CRAFTS-FARROW STATE HOSPITAL

JULY 12, 1985	THROUGH	AUGUST 30, 1985	@	\$40.00 PER DAY	\$	1,960.00
AUGUST 30, 1985	THROUGH	SEPTEMBER 23, 1985	@	\$55.00 PER DAY		1,320.00
SEPTEMBER 23, 1985	THROUGH	OCTOBER 07, 1985	@	\$40.00 PER DAY		560.00
						\$ 3,840.00
LESS AMOUNT PAID						1,800.00
BALANCE DUE						\$ 2,040.00

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 06/20/86 THERE IS/WAS DUE AND OWING THE STATE DEPARTMENT OF MENTAL HEALTH THE SUM OF \$2,040.00 AND THAT SHE IS THE PROPER OFFICER TO MAKE THIS VERIFICATION.

Beverly R. Black

SWORN TO AND SUBSCRIBED BEFORE ME
DONNA P. THOMPSON
THIS 20TH DAY OF JUNE 1986

Donna P. Thompson
NOTARY PUBLIC FOR SOUTH CAROLINA

MY COMMISSION EXPIRES ON AUGUST 13, 1989

43370