

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

FOR MAINTENANCE AND MEDICAL CARE OF: JOSEPH L. MULLINAX
#007-51-7052

BOOK

1 PAGE 033

AT EARLE E. MORRIS, JR., ALCOHOL AND DRUG ADDICTION CENTER

MARCH 03, 1975 THROUGH	APRIL 04, 1975	\$ 111.00 PER DAY	\$ 352.00
DECEMBER 29, 1975 THROUGH	FEBRUARY 07, 1976	\$ 113.00 PER DAY	520.00
FEBRUARY 08, 1976 THROUGH	FEBRUARY 13, 1976	\$ 113.00 PER DAY	65.00
DECEMBER 03, 1982 THROUGH	DECEMBER 22, 1982	\$ 335.00 PER DAY	665.00
MARCH 22, 1983 THROUGH	MAY 09, 1983	\$ 445.00 PER DAY	2,160.00
LESS AMOUNT PAID			\$ 1,762.00
BALANCE DUE			\$ 2,929.00

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 09/12/86 THERE IS/HAS DUE AND OWING THE STATE DEPARTMENT OF MENTAL HEALTH THE SUM OF \$2,929.00 AND THAT SHE IS THE PROPER OFFICER TO MAKE THIS VERIFICATION.

SWORN TO AND SUBSCRIBED AT _____
LYNDA ELDER FERGUSON
THIS 12TH DAY OF SEPTEMBER, 1986

Lynnda Elder Ferguson
NOTARY PUBLIC FOR SOUTH CAROLINA

MY COMMISSION EXPIRES ON AUGUST 9, 1989

recorded September 16th, 1986 at 10:00 A/M

10873