

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

FOR MAINTENANCE AND MEDICAL CARE OF: LEE CHAPMAN
#008-60-8360

BOOK

1 PAGE/062

AT CRAFTS-FARROW STATE HOSPITAL

AUGUST 27, 1986	THROUGH	SEPTEMBER 16, 1986	@	\$45.00 PER DAY	\$	900.00
SEPTEMBER 16, 1986	THROUGH	SEPTEMBER 30, 1986	@	\$55.00 PER DAY		770.00
SEPTEMBER 30, 1986	THROUGH	OCTOBER 31, 1986	@	\$45.00 PER DAY		1,440.00
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LESS AMOUNT PAID					\$	3,110.00
						408.00
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BALANCE DUE					\$	2,702.00

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 10/31/86 THERE IS/WAS DUE AND OWING THE STATE DEPARTMENT OF MENTAL HEALTH THE SUM OF \$2,702.00 AND THAT SHE IS THE PROPER OFFICER TO MAKE THIS VERIFICATION.

Beverly Black

SHORN TO AND SUBSCRIBED BEFORE ME
LYNDA ELDER FERGUSON
THIS 31ST DAY OF OCTOBER 1986

Lynnda Elder Ferguson
NOTARY PUBLIC FOR SOUTH CAROLINA

RECORDED NOV. 3, 1986
AT 2:00 P/M

18025

MY COMMISSION EXPIRES ON AUGUST 9, 1989