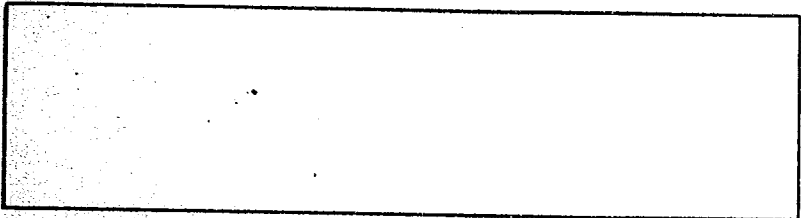


SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH
P.O. Box 485
Columbia, South Carolina 29202

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FOR MAINTENANCE AND MEDICAL CARE OF: Suzanne Angela Martin #811-7896

- | | |
|--|---|
| <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 type="checkbox"/> At S. C. State Hospital |
| <input checked="" 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 | |



December 16, 1981 through December 21, 1981 @ \$35.00 per day	\$ 175.00
February 14, 1983 through March 12, 1983 @ \$45.00 per day	1,170.00
	\$ 1,345.00
Less Amount Paid	0.00
Balance Due	\$ 1,345.00

Not to be used for insurance purposes.

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 Resources 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 6/23/87 there is/was due and owing the State Department of Mental Health the sum of \$1,345.00 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 23rd day of June 19 87

Lynda Elder Ferguson

Notary Public for South Carolina

My commission expires on August 9, 1989