

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

FOR MAINTENANCE AND MEDICAL CARE OF: DENNIS W. ROBINSON
#008-11-7122

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

FEBRUARY 11, 1983	THROUGH	MARCH 11, 1983	@ \$35.00 PER DAY	\$ 380.00
JUNE 29, 1983	THROUGH	JULY 12, 1983	@ \$45.00 PER DAY	585.00
JUNE 19, 1984	THROUGH	JUNE 26, 1984	@ \$100.00 PER DAY	700.00

LESS AMOUNT PAID				\$ 2,265.00

BALANCE DUE				\$ 2,265.00

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 05/18/88 THERE IS/WAS DUE AND OWING THE STATE DEPARTMENT OF MENTAL HEALTH THE SUM OF \$2,265.00 AND THAT SHE IS THE PROPER OFFICER TO MAKE THIS VERIFICATION.

Beverly R. Black

SWORN TO AND SUBSCRIBED BEFORE ME
LYNDA ELDER FERGUSON
THIS 18TH DAY OF MAY 1988

Recorded May 23, 1988 at 2:00 P/M

51491

Lynnda Elder Ferguson
NOTARY PUBLIC FOR SOUTH CAROLINA

MY COMMISSION EXPIRES ON AUGUST 9, 1989