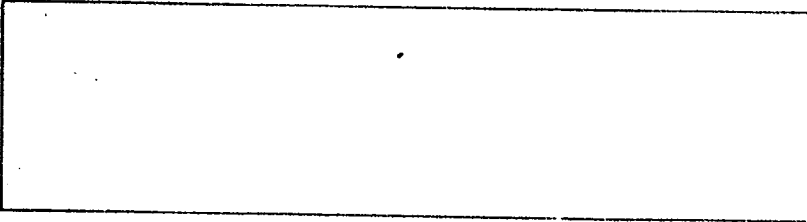


SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH
P.O. Box 485
Columbia, South Carolina 29202

FOR MAINTENANCE AND MEDICAL CARE OF: Stephon Lemont Leonard #861-7828

- | | |
|--|---|
| <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 | |



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December 9, 1986 through December 24, 1986 @ \$110.00 per day	\$ 1,650.00
December 27, 1986 through January 23, 1987 @ \$110.00 per day	2,970.00
	\$ 4,620.00
Less Amount Paid	0.00
Balance Due	\$ 4,620.00

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 6/27/88 there is/was due and owing th. State Department of Mental Health the sum of \$4,620.00 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 27th day of June 1988

Lynda Elder Ferguson

Notary Public for South Carolina

Recorded June 28, 1988 at 11:00 A/M

57938

My commission expires on August 9, 1989