•	VOL I MGE 508
STATE OF SOUTH CAROLINA	NOTICE OF LIFT
COUNTY OF Greenville	NOTICE OF LIEN
SOUTH CAROLINA MENTAL HEALTH COMMISSION, Claimant, vs.	MAY 1 4 1979
Margaret E. Tollison, #007-63-7767	712,9101712112.3 4.5.8
Lienee.	,
TO WHOM IT MAY CONCERN:	
YOU ARE HEREBY NOTIFIED that pursuant to the	provisions of Section 96, Subsection d, of Act No.
368 of the Acts of the General Assembly of South Carolina for 1953	, and any amendments thereto, the South Carolina
Mental Health Commission claims and has a lien from the2nd	L day of June 19 71
upon all of the real and personal property ofMargaret	E. Tollison
for the expense incurred by the State of South Carolina in furnishi	
health facility to the said Margaret E. Tolli	son ,
the amount of said expense to the State as of the date hereof being	\$ _4,666.69 This lien will also attach
to any real or personal property as may be hereafter acquired by the	
	while the above-stated amount is unpaid.
YOU ARE FURTHER NOTIFIED that the South C	arolina Mental Health Commission will claim under
this lien such further amounts as accrue after the date above set ou	t, for any further medical care and maintenance re-
ceived in any State mental health facility by the above-named lienes	e, at the regular rates charged therefor.
Dated at Columbia, S. C., this	y of19 79
In the presence of: Barbara L. James Engla E. Fergueron	OUTH CAROLINA MENTAL HEALTH COMMISSION By: A Mark to Assy. Director Patients' Personal Affairs (Mrs.) Donna P. Thompson
STATE OF SOUTH CAROLINA	•
COUNTY OF RICHLAND	
PERSONALLY appeared before me Barbara I	. James ,
who, being duly sworn, says that a he sawDonna P. Thomp	son,
as Energine Asst. Director of Patients' Personal Affairs represent	•
as its act and deed, sign and execute the foregoing Notice of Lien,	and thats he with Lynda E. Ferguson
witnessed the execution	thereof.
SWORN to before me this10th	8. 1 DA.
day of May	Bulara L. James

Notary Public for South Carolina

SCOMH FORM F-55

My Commission Expires May 1, 1983