JUL 2 9 1986 b STATE OF SOUTH CAROLINA Donnie S. Tankerster 1 PAGE 1007 COUNTY OF ___GRENVILLE BOOK NOTICE OF LIEN SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH Claimant, Dorothy Turner Atkinson #840-8196 Lience TO WHOM IT MAY CONCERN: YOU ARE HEREBY NOTIFIED that pursuant to the provisions of Section 96, Subsection d, of the Acts of the General Assembly of South Carolina for 1953, and any amendments thereto, the South Carolina Department of Mental Health claims and has a lien from the 28th day of 19 49 upon all of the real and personal property of Dorothy Turner for the expense incurred by the State of South Carolina in ___ the amount of said expense to the State as of the 23rd day 19 86 being \$ 4,207.82 . This lien will also attach to any real or personal property as may be hereafter acquired by the said __ Dorothy Tunnar Atkinson___ while the above-stated amount is unpaid. YOU ARE FURTHER NOTIFIED that the South Carolina Department of Mental Health will claim under this lien such further amounts as accrue after the date above set out, for any further medical care and maintenance received in any State mental health facility by the above-named lience, at the regular rates charged therefor. Dated at Columbia, S. C. this 23rd day of ____July

In the presence of:

By:

SPINOWS / Office Manager

Patient Personal Affairs

(Mrs.) Bayarly R. Black

SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH