

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

BOOK

1 PAGE 1065

FOR MAINTENANCE AND MEDICAL CARE OF: LEVONIA ROBERTS
#008-50-8530

AT CRAFTS-FARROW STATE HOSPITAL

NOVEMBER 12, 1985	THROUGH	DECEMBER 12, 1985	@	\$40.00 PER DAY	\$	1,200.00
DECEMBER 12, 1985	THROUGH	DECEMBER 15, 1985	@	\$55.00 PER DAY		220.00
DECEMBER 16, 1985	THROUGH	JANUARY 17, 1986	@	\$40.00 PER DAY		1,280.00
					\$	2,700.00
LESS AMOUNT PAID						0.00
BALANCE DUE					\$	2,700.00

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 10/31/86 THERE IS/WAS DUE AND OWING THE STATE DEPARTMENT OF MENTAL HEALTH THE SUM OF \$2,700.00 AND THAT SHE IS THE PROPER OFFICER TO MAKE THIS VERIFICATION.

Beverly R. Black

SHORN TO AND SUBSCRIBED BEFORE ME
LYNDA ELDER FERGUSON
THIS 31ST DAY OF OCTOBER 1986

Lynnda Elder Ferguson
NOTARY PUBLIC FOR SOUTH CAROLINA

MY COMMISSION EXPIRES ON AUGUST 9, 1989

Recorded Nov 5, 1986 at 10.00 A.M.

18420