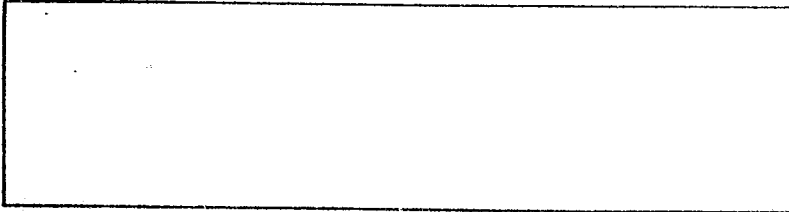


SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH
P.O. Box 485
Columbia, South Carolina 29202

FOR MAINTENANCE AND MEDICAL CARE OF: William Walker #870-0325

- | | |
|---|---|
| <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 checked="" type="checkbox"/> At S. C. State Hospital |
| <input 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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August 11, 1987 through August 15, 1987 @ \$45.00 per day	\$ 180.00
Less Amount Paid	0.00
Balance Due	\$ 180.00

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 6/14/88 there is/was due and owing the State Department of Mental Health the sum of \$180.00 and that ~~he~~/she is the proper officer to make this verification.

Beverly R. Black

Sworn to and subscribed before me
Donna P. Thompson
this 14th day of June 19 88

Donna P. Thompson
Notary Public for South Carolina

My commission expires on August 13, 1989

55910