STATE OF SOUTH CAROLINA )
COUNTY OF GREENVILLE )

SCOMH FORM





RECEIPT AND SATISFACTION

BOOK 1 PAGE 399

The South Carolina Department of Mental Health hereby acknowledges receipt of the sum of \$ 685.60 in satisfaction in full of the maintenance and medical care

claim filed against the estate of Recorded in Probate Court in Lien Book III, Page 33

Joseph Woodward, #008-88-5162, (Deceased) Recorded in RMC Office in Mental Health Lien Book 1, page 1353

IN WITNESS WHEREOF, The South Carolina Department of Mental Health has hereunto set its hand and seal this 23 rdday of June, 1989

and see the hand and seed this	(a) (1)
IN THE PRESENCE OF:  Clice E. Moore  Alex C. Sando  * * * * *	SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH  By: Mongo  (Mrs.) Donna P. Thompson  Director  Patients Personal Affairs
STATE OF SOUTH CAROLINA ) COUNTY OF RICHLAND )	PROBATE
PERSONALLY appeared before me_	Alice E. Moore who,
after being duly sworn, says that sh	ne saw the within named South Carolina Depart-
ment of Mental Health by Donna F	P. Thompson , sign, seal and execute the
foregoing Receipt and Satisfaction t	his23rd day of June , 1989 and that
she with Alice C. Barrett wit	nessed the execution thereof.
SWORN to before me Lynda Elder Ferguson	
this 23rday of June , 1989  Motary Public for South Carolina My Commission expires on August 9,	
•	

Recorded June 29, 1989 at 10:30 A/M

28151

Co.