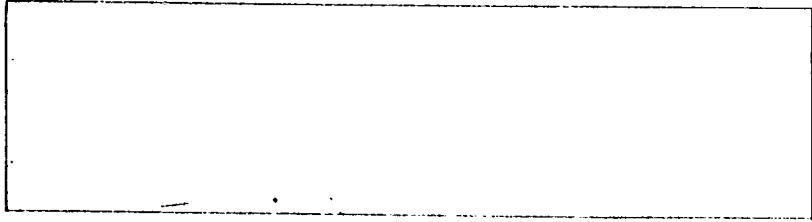


**SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH**  
P.O. Box 485  
Columbia, South Carolina 29202

**FOR MAINTENANCE AND MEDICAL CARE OF:** Thomas Rufus Bigby, #008-90-8181, (Deceased)

- |   |   |
|---|---|
| <input type="checkbox"/> At C. M. Tucker, Jr., Human Resources Center               | <input type="checkbox"/> At James F. Byrnes Clinical Center       |
| <input checked="" type="checkbox"/> At Crafts-Farrow State Hospital                 | <input 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                    |   |



BOOK 1 PAGE 432

|   |                  |
|---|------------------|
| June 22, 1989 through July 28, 1989 @ \$60.00 per day           | \$2,160.00       |
| September 26, 1989 through September 29, 1989 @ \$60.00 per day | 180.00           |
| September 29, 1989 through September 30, 1989 @ \$75.00 per day | 75.00            |
|   | <hr/> \$2,415.00 |
| Less Amount Paid  | 900.00           |
| Balance Due   | <hr/> \$1,515.00 |

REC 2 1989

STATE OF SOUTH CAROLINA )  
COUNTY OF RICHLAND )

Before me personally appeared (Mrs.) Beverly R. Nicholson 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 12/6/89 there is/was due and owing the State Department of Mental Health the sum of \$1,515.00 and that he/she is the proper officer to make this verification.

*Beverly R. Nicholson*

Sworn to and subscribed before me  
Lynda E. Ferguson  
this 6th day of December 19 89

*Lynda E. Ferguson*  
Notary Public for South Carolina

My commission expires on July 10, 1999

Recorded December 8, 1989 at 12:00 P/M

55386