

AFFIDAVIT OF COSTS

On 09/28/21, Brad White personally appeared before me, the undersigned authority, and after being placed under oath affirmed the truth of the following:

My name is Brad White. I am over the age of 18 years, and legally capable of making this affidavit and personally confirming the truth of the facts stated herein.

I am the custodian of billing for Memorial Hospital of Laramie County d/b/a Cheyenne Regional Medical Center ("CRMC"). Attached to this affidavit is an itemization of services and charges relating to [REDACTED]

The itemized services and costs were provided by CRMC to the patient while the patient was in the custody of the County Sheriff.

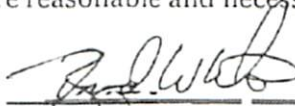
CRMC has attempted to collect the cost of the treatment from the prisoner and his/her insurance carrier (if applicable).

CRMC has made reasonable efforts to secure collection from the patient, including, statements mailed every 28 days to 1910 Pioneer Avenue, Cheyenne, WY 82001.

CRMC has been unable to collect.

As such, pursuant to Wyoming Statute Section 18-6-303, CRMC requests that the board of county commissioners pay the costs detailed in the attachment.

The charges for services provided were reasonable and necessary at the time and place the service was provided.


Custodian of Billing

STATE OF WYOMING)

)

COUNTY OF LARAMIE)

Subscribed and sworn to before me by Brad White on this 28th day of September, 2021.


Notary Public

