

**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR**

**ACTION REFERRAL**

<b>TO</b> <i>Singleton</i>	<b>DATE</b> <i>8/6/07</i>
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<b>DIRECTOR'S USE ONLY</b>	<b>ACTION REQUESTED</b>
<b>1. LOG NUMBER</b>  <b>000065</b>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
<b>2. DATE SIGNED BY DIRECTOR</b>  <i>C. Mills</i>	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____
	<input type="checkbox"/> FOIA DATE DUE _____
	<input checked="" type="checkbox"/> Necessary Action

<b>APPROVALS</b> <small>(Only when prepared for director's signature)</small>	<b>APPROVE</b>	<b>* DISAPPROVE</b> <small>(Note reason for disapproval and return to preparer.)</small>	<b>COMMENT</b>
1.			
2.			
3.			
4.			



**PALMETTO**  
LOWCOUNTRY BEHAVIORAL HEALTH

**RECEIVED**

August 1, 2007

AUG 06 2007

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

Ms. Susan Bowling, Acting Director  
SC DHHS  
P. O. Box 8206  
1801 Main Street  
Columbia, SC 29202

Re: Change of Chief Executive Officer  
Palmetto Lowcountry Behavioral Health  
Provider #RTF-021

Dear Ms. Bowling:

This letter shall serve as notification effective August 1, 2007, **Cherie Tolley** is the Chief Executive Officer of Palmetto Lowcountry Behavioral Health.

Thank you for your attention.

Sincerely,

Cherie Tolley  
Interim Chief Executive Officer