

LIEN FOR MEDICAL PAYMENTS UNDER ALABAMA MEDICAID PROGRAM

WHEREAS, Daisy Bunn Stephenson, ("Medicaid Claimant") is justly indebted to the Alabama Medicaid Agency ("the Agency") to the extent that the Agency has paid medical benefits for Medicaid Claimant under the Alabama Medicaid Program ("the Program"); and

WHEREAS, Medicaid Claimant may hereafter become indebted to the Agency to the extent that the Agency pays future benefits for Medicaid Claimant,

NOW, therefore, in order to secure the repayment of said indebtedness and in order for Medicaid Claimant to obtain medical benefits under the Program, the Medicaid Claimant, joined by (his)(her) spouse, does hereby GRANT, BARGAIN, SELL, ASSIGN and CONVEY unto the Agency, its successors and assigns, a lien for the full dollar value of said medical benefits paid and to be paid, on the following described real estate situated in Shelby County, Alabama to-wit:

Beginning at the Northwest corner of the J.L. Waltrous lot and running thence west along the south side of the Columbiana and Tuscaloosa Public Road to the northwest corner of the Northeast Quarter of the Southeast Quarter of Section 5, thence south 35 yards thence east to the southwest corner of the J.L. Waltrous Lot, thence north to the Columbiana and Tuscaloosa Public Road, the point of beginning, and being a part of the Northeast Quarter of the Southeast Quarter of Section 5, Township 22, Range 3 West, and being the same lot described in that deed from Julia B. Bunn to Eugene Bunn, dated January 6, 1930, and recorded in Deed Book 89 on page 37, in the Office of the Judge of Probate of Shelby County, Alabama. ALSO, a certain lot situated adjacent to the above described property and described as follows: Beginning at the Northeast corner of the NW $\frac{1}{4}$ of the SE $\frac{1}{4}$ of Section 5, Township 22 South, Range 3 West, and run thence West along the North line of said quarter Section 86 feet; thence South 217.3 feet; thence East 86 feet to the East line of said quarter Section; thence North along said line 217.3 feet to the point of beginning. The above described property is not the homestead of grantor.

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11:53 AM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
DOT HEL 8.50

Subject, however, to all existing liens now on said property.

Notice of this lien will be recorded in said County. The dollar value of this lien as it may exist from time to time, may be obtained by writing to: Lien Office, Alabama Medicaid Agency, Post Office Box 5624, Montgomery, Alabama 36103-5624. This lien shall be due and payable upon the sale, transfer or lease of said property, or upon the death of Medicaid Claimant, and shall otherwise be enforceable in accordance with the limitations of 42 U.S.C. §1396a(18) as the same may be amended.

IN WITNESS WHEREOF, the undersigned has duly executed this instrument to voluntarily grant the aforesaid lien on this the 28th day of January, 19 97.

Daisy Bunn Stephenson
MEDICAID CLAIMANT

SPOUSE

WITNESS: Karen Watts
ADDRESS: PO Box 154 Centerville, AL 35042
TELEPHONE: 205-926-5269

WITNESS: Sara White RN
ADDRESS: Rt 1 Box 100 BB Centerville, AL
TELEPHONE: 205 926-5633

STATE OF ALABAMA
COUNTY OF Bibb

I, the undersigned, a Notary Public in and for said State and County, hereby certify that Daisy Bunn Stephenson whose name as an Alabama Medicaid claimant, a (single)(married) person, is signed to the foregoing instrument, and N/A (his) (her) spouse, whose name is also signed to said instrument, acknowledged before me on this day that being informed of the contents of said instrument (they)(he)(she) executed the same voluntarily on the day the same bears date.

Given under my hand and official seal this the 28th day of January, 19 97.

(SEAL)

Shyle L. Bearden
NOTARY PUBLIC
Centerville, AL 35042
ADDRESS
Commission Expires 01-04-99

PREPARED BY: ALABAMA MEDICAID AGENCY
P. O. Box 2539
Selma, AL 36702