

THIS INSTRUMENT PREPARED BY:
SOUTHERN LAND TITLE
LEEDS, ALABAMA

Bham

4092

AFFIDAVIT OF DISCLAIMER

STATE OF ALABAMA

COUNTY OF Shelby

BEFORE ME, THE UNDERSIGNED AUTHORITY, PERSONALLY APPEARED
William C. Brown, WHO AFTER BEING SWORN UNDER
OATH DEPOSES AND STATES:

1. I HAVE BEEN INFORMED OF THE CONTENTS HEREIN.
2. THAT AT NO TIME HAVE I EVER RESIDED AT THE FOLLOWING ADDRESS:
?
3. THAT AT NO TIME HAVE I BEEN INDEBTED WITHOUT PAYMENT IN FULL
TO: Shelby Co. Hospital / Shelby Med. Ctr.
4. I AM NOT THE SAME William Brown OF RECORD IN
BOOK 86 PAGE 191 DATED 6-17-86 AND FILED FOR RECORD ON
IN THE AMOUNT OF \$ 164.20 PLUS \$ _____ COSTS AND
FILED UNDER SOCIAL SECURITY NUMBER [REDACTED].
5. MY SOCIAL SECURITY NUMBER IS [REDACTED].

BOOK 360 PAGE 733

William C. Brown
SIGNED

WITNESS: _____

WITNESS: _____

STATE OF ALABAMA
I CERTIFY THIS
INSTRUMENT WAS FILED

200
100

91 AUG 27 AM 9:37

650

STATE OF ALABAMA

COUNTY OF Shelby

SUBSCRIBED AND SWORN TO BEFORE ME ON THIS 9th DAY OF

August, 19 91.

Martha L. Wood
NOTARY PUBLIC

MY COMMISSION EXPIRES: 10-10-94

RET. RN TO
JIM WALTER HOMES INC.
P. O. BOX 31601
TAMPA, FLORIDA 33631-3601