

STATE OF ALABAMA
COUNTY OF Shelby

6089

LIEN FOR MEDICAL PAYMENTS UNDER ALABAMA MEDICAID PROGRAM

WHEREAS, Katie W Bolding, ("Medicaid Recipient") is justly indebted to the Alabama Medicaid Agency ("the Agency") to the extent that the Agency has paid medical benefits for Medicaid Recipient under the Alabama Medicaid Program ("the Program"); and

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

NOW, therefore, in order to secure the repayment of said indebtedness and in order for Medicaid Recipient to obtain medical benefits under the Program, the Medicaid Recipient, 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:

One lot for legal description: Begin at North West corner of Depot and Dauphin Street, and at SE corner of Block No 4 as per S D. Browns map of South Montevallo, Alabama. Thence North 60 deg West 183 feet to West side of an alley. Thence North 30 deg East 98 feet to Southeast corner of lot No. 5 as per Velma Langstons addition to said Block No. 4, Thence North 60 deg West 128 feet to the East line of Jake Boyles lot: Thence north 30 deg East 50 feet to point; thence South 60 deg East 128 feet to said alley; thence South 30 deg West 50 feet to the point of beginning. Being known as lot No. 5 as per said Velma Langstons addition to said Block No. 4 Being in SW $\frac{1}{4}$ of NW $\frac{1}{4}$ of Tract on Section 3 TP 24 Range 12 East.

Inst # 1994-14976
05/06/1994-14976
12:18 PM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
DDI MCD 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: Legal Office, Alabama Medicaid Agency, 2500 Fairlane Drive, Montgomery, AL 36130. This lien shall be due and payable upon the sale, transfer or lease of said property, or upon the death of Medicaid Recipient, 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 8 day of Feb, 1994.

Katie Bolding
MEDICAID RECIPIENT
Deceased
SPOUSE

WITNESS: _____ WITNESS: _____
ADDRESS: _____ ADDRESS: _____
TELEPHONE: _____ TELEPHONE: _____

STATE OF ALABAMA
COUNTY OF Jefferson

I, the undersigned, a Notary Public in and for said State and County, hereby certify that Katie Bolding whose name as an Alabama Medicaid recipient, a (single) (married) person, is signed to the foregoing instrument, and _____ (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 8 day of Feb, 1994.
(SEAL)

Karin M. Landry
NOTARY PUBLIC
1028 Bessemer Rd. Shreve AL 35228
ADDRESS
Commission Expires Sept 6 - 1996

PREPARED BY: Jan Smith
ALABAMA MEDICAID AGENCY
25 BAGBY DRIVE, ROOM 202
BIRMINGHAM, AL 35203