1872

Department of the Treasury - Internal Revenue Service

Made of Fadamal Tax Liam

Form 668 (Y)(c)

Area: MALL BUSINESS/SELF EMPLOYED AREA ien Unit Phone: (800) 913-6050		OYED AREA #4 050		21506		200	
Code, we an have been a demand for there is a lice property be additional p	re giving a notice issessed against the payment of this en in favor of the slonging to this takenalties, interest,	that taxes (including following named is liability, but it re United States on a expayer for the amount and costs that ma	of the Internal Reving interest and pentaxpayer. We have mains unpaid. There all property and right ount of these taxes, y accrue.	alties) made efore, ats to and		06 012711	
lesidence IMPORTA unless notic	8304 KEN HIGHLAND INT RELEASE INI e of the lien is refile following such date,	INEDY AVE O, IN 46322-1 FORMATION: For a d by the date given in		below,	MICHAEL REO	STATE LAKE FILED F	
Kind of Tax (a)	Tax Period Ending (b)	Identifying Numb	Date of Assessment (d)	Last Day for Refiling (e)		d Balance	
940 941 941 941	12/31/2004 12/31/2004 03/31/2005 06/30/2005	35-1910832 35-1910832 35-1910832 35-1910832	04/18/2005 04/04/2005 07/11/2005	11/09/2015 operty of	WZ.	1304.13 9187.37 5158.51 2157.06	

Title Signature Susan A. Hansen

Director, Campus Compliance Operations 24-09-1863

(NOTE: Certificate of officer authorized by law to take acknowledgment is not essential to the validity of Notice of Federal Tax lien Rev. Rul. 71-466, 1971 - 2 C.B. 409)

Form 468(Y)(s) (Rev. 2-20)

Part 1 - Kept By Recording Office

Form **668(Y)(c)** (Rev. 2-2004) CAT. NO 60025X

Declaration

This form is to be signed by the preparer of a document and recorded with each document in accordance with IC 36-2-7.5-5(a)

I, the undersigned preparer of the attached document, in accordance with IC 36-2-7.5, do hereby affirm. Under the penalties of perjury:

- 1. I have reviewed the attached document for the purpose of identifying and, to the extent permitted by law, redacting all Social Security numbers.
- 2. I have redacted, to the extent permitted by law, each Social Security number in the attached document.

I, the undersigned, affirm under the penalties of perjury, that the forgoing declarations are true.

This Document is the property of the Lake County Resort.

Signature of Declarant

Printed Name of Declarant