1872

Department of the Treasury - Internal Revenue Service

Form 668 (Y)(c)
(Rev. February 2004)

No

Notice of Federal Tax Lien

Area:	ESS/SELF EMPL		al Number	For Optio	onal Use by Recording Uffice
	e: (800) 913-6		267	165406	06
Code, we are have been as a demand for there is a lie property bell additional pe	e giving a notice seessed against the payment of this in favor of the onging to this ta	, 6322, and 6323 of that taxes (including the following-named ta to liability, but it rema United States on all p the payer for the amount and costs that may a	interest and pen xpayer. We have ins unpaid. Ther property and rigi at of these taxes,	alties) made efore, its to	012719
taine or raxp	4,01.002111 15 1		·		
Residence PO BOX 2104 GARY, IN 46409-0104					STALL LAP FILED 2005 FEB
unless notice	of the lien is refile allowing such date,	ORMATION: For each do by the date given in co operate as a certificate of	lumn (e), this notic	s shall,	AKE COULED FOR R
Kind of Tax (a)	Tax Period Ending (b)	Identifying Number	Date of Assessment (d)	Last Day for Refiling (e)	○ Unpaid Balance ≥ of Assessment (f)
1040	12/31/2000	XXX-XX-8734 C			552.39
		This Docume the Lake (nt is the production of the country Reco		
Place of Filing	COUNTY LAKE C	RECORDER OUNTY POINT, IN 4630		Total	\$ 552.39
This notice wa	rument was as prepared and s th day of	signed at ST	san A. Hans PAUL, MN	en, Internal	Revenue Service. , on this, 27 725
Signature Susan A.	/ 07	a. Hansen	Title Dia	rector, Campu erations 24-0	us Compliance

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.

the Lake County Records
Signature of Declarant

This Document is the property of the Lake County Records
Signature of Declarant

Printed Name of Declarant