Form 668 (Z)

11564

Department of the Treasury - Internal Revenue Service

Certificate of Release of Federal Tax Lien (Rev. 10-2000) For Use by Recording Office Serial Number Area: SMALL BUSINESS/SELF EMPLOYED AREA #7 Lien Unit Phone: (800) 913-6050 359307829 I certify that the following-named taxpayer, under the requirements of section 6325 (a of the Internal Revenue Code has satisfied the taxes listed below and all statutory additions. Therefore, the lien provided by Code section 6321 for these taxes and additions has been released. The proper officer in the office where the notice of June 22 internal revenue tax lien was filed on 1993 , is authorized to note the books to show the release of this lien for these taxes and additions. Name of Taxpayer DAVID L WELLS Residence 9333 ELLEN ST HIGHLAND, IN 46322-2926 COURT RECORDING INFORMATION: Serial No. Liber Page UCC No. n/a n/a 93040072 n/a Unpaid Balance Last Day for Tax Period Date of Refiling of Assessment **Ending** Kind of Tax Identifying Number Assessment <u>'(f)</u> (e) (b) (c) 📗 (a) -2270 06/14/1993 07/14/2003 <del>00</del> 8220.49 1040 12/31/1988 9094.73 07/14/2003 12/31/1989 1040 This Document is the property of the Lake County Recorder! Place of Filing COUNTY RECORDER 17315.22 Total LAKE COUNTY CROWN POINT, IN 46307 This instrument was prepared by Susan A. Hansen, Internal Revenue Service. Indianapolis, IN This notice was prepared and signed at 07th day of December

Signature Hanseysan a. Hanser Susan A

Title Director, Campus Compliance Operations

CAT. NO 600261

(NOTE: Certificate of officer authorized by law to take acknowledgments is not essential to the validity of Certificate of Release of Federal Tax lien Rev. Rul. 71-466, 1971 - 2 C.B. 409) Form 668 (Z) (Rev. 10-2000)

Part 1 - RECORDING OFFICE

Prescribed by the State Board of Accounts (2005)

## 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 foregoing declarations are true.

