1872

Department of the Treasury - Internal Revenue Service

artifolic of the freedom, internal nevertae out

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

## **Notice of Federal Tax Lien**

Area: сматт висты	IESS/SELF EMPL		ial Number		For Option	at Use by Red	cording Office
	ne:(800) 829-3		274	427906	• •		00
Code, we are have been as a demand fo there is a lie property bel additional pe	e giving a notice ssessed against the payment of this in favor of the longing to this ta	, 6322, and 6323 of that taxes (including the following-named the sliability, but it remains and costs that may a taxon costs.	interest and pen expayer. We have ains unpaid. Ther property and rig nt of these taxes,	alties) e made efore, hts to			015463
Residence 5186 E 105TH LN CROWN POINT, IN 46307-7610						.₹	20
unless notice	e of the lien is refile ollowing such date,	<b>ORMATION:</b> For eac d by the date given in co operate as a certificate	olumn (e), this notic	e shall,		[241년] · 조	STATE OF LAKE OF LAKE OF
Kind of Tax (a)	Tax Period Ending (b)	Identifying Number	Date of Assessment	Last Da Refil	ing		id Balance sessment (f)
1040 1040 1040 1040 1040 1040	12/31/1997 12/31/1998 12/31/2000 12/31/2001 12/31/2002 12/31/2003	XXX-XX-1728 XXX-XX-1728 XXX-XX-1728 XXX-XX-1728 XXX-XX-1728	06/01/1998 05/31/1999 05/28/2001 06/03/2002 08/11/2003 05/24/2004	07/01 06/30 06/27 07/03 09/10	/2008 /2009 /2011		
Place of Filing	COUNTY LAKE C	RECORDER OUNTY POINT, IN 4630	7 SEAL S		Total	\$	9831.52
This inst	rument was	prepared by Su	san A. Hans	en, Int	ernal	Revenue	e Service.
· :	as prepared and s  th day of Feb	oruary , 2006.	r Paul, Mn			950	, on this,
Signature Susan A.		itchell	Title Dia Ope	rector, eration	Campus s 24-00	Compl 0-0008	íance
(NOTE: C		thorized by law to take ack . 409)	knowledgment is not e	essential to tl	-		deral Tax lien

Part 1 - Kept By Recording Office

Form **668(Y)(c)** (Rev. 2-2004) CAT. NO 60025X Prescribed by the State Board of Accounts (2005) County Form 170

## 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.

