

Notice of Federal Tax Lien

Area: **SMALL BUSINESS/SELF EMPLOYED AREA #4** Serial Number: **274452206**
 Lien Unit Phone: (800) 913-6050

For Optional Use by Recording Office

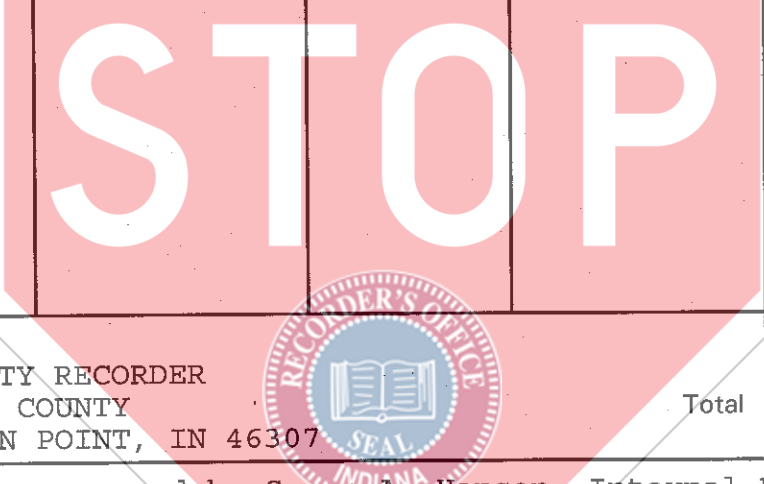
As provided by section 6321, 6322, and 6323 of the Internal Revenue Code, we are giving a notice that taxes (including interest and penalties) have been assessed against the following-named taxpayer. We have made a demand for payment of this liability, but it remains unpaid. Therefore, there is a lien in favor of the United States on all property and rights to property belonging to this taxpayer for the amount of these taxes, and additional penalties, interest, and costs that may accrue.

Name of Taxpayer **SIMKO ENTERPRISES INC , a Corporation**

Residence **12211 N OAKWOOD DRIVE
 ST JOHN, IN 46373-9155**

IMPORTANT RELEASE INFORMATION: For each assessment listed below, unless notice of the lien is refiled by the date given in column (e), this notice shall, on the day following such date, operate as a certificate of release as defined in IRC 6325(a).

Kind of Tax (a)	Tax Period Ending (b)	Identifying Number (c)	Date of Assessment (d)	Last Day for Refiling (e)	Unpaid Balance of Assessment (f)
941	06/30/2004	35-2062713	10/11/2004	11/10/2014	3189.83
941	09/30/2004	35-2062713	05/09/2005	06/08/2015	3688.44
941	12/31/2004	35-2062713	02/28/2005	03/30/2015	11174.15
941	03/31/2005	35-2062713	07/11/2005	08/10/2015	1727.85
941	06/30/2005	35-2062713	09/12/2005	10/12/2015	466.28
941	09/30/2005	35-2062713	12/12/2005	01/11/2016	9062.85



Place of Filing **COUNTY RECORDER
 LAKE COUNTY
 CROWN POINT, IN 46307** Total \$ **29309.40**

This instrument was prepared by **Susan A. Hansen**, Internal Revenue Service.

This notice was prepared and signed at **ST PAUL, MN**, on this,

the 14th day of February, 2006.

Signature *R. A. Mitchell* Title **Director, Campus Compliance Operations 24-09-1841**
Susan A. Hansen

2006 015469
 2006 FEB 28 AM 11:46
 STATE OF INDIANA
 LAKE COUNTY
 FILED FOR RECORDING
 MICHAEL A. BROWN
 RECORDER

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.

