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 Form 668 (Z)
 (Rev. 10-2000)

1872

Department of the Treasury - Internal Revenue Service
Certificate of Release of Federal Tax Lien

Area: WAGE & INVESTMENT AREA #2 Lien Unit Phone: (800) 913-6050	Serial Number 215230105	For Use by Recording Office
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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 internal revenue tax lien was filed on April 05 2005, is authorized to note the books to show the release of this lien for these taxes and additions.

Name of Taxpayer
 HAROLD R & JENNIFER L WELLS

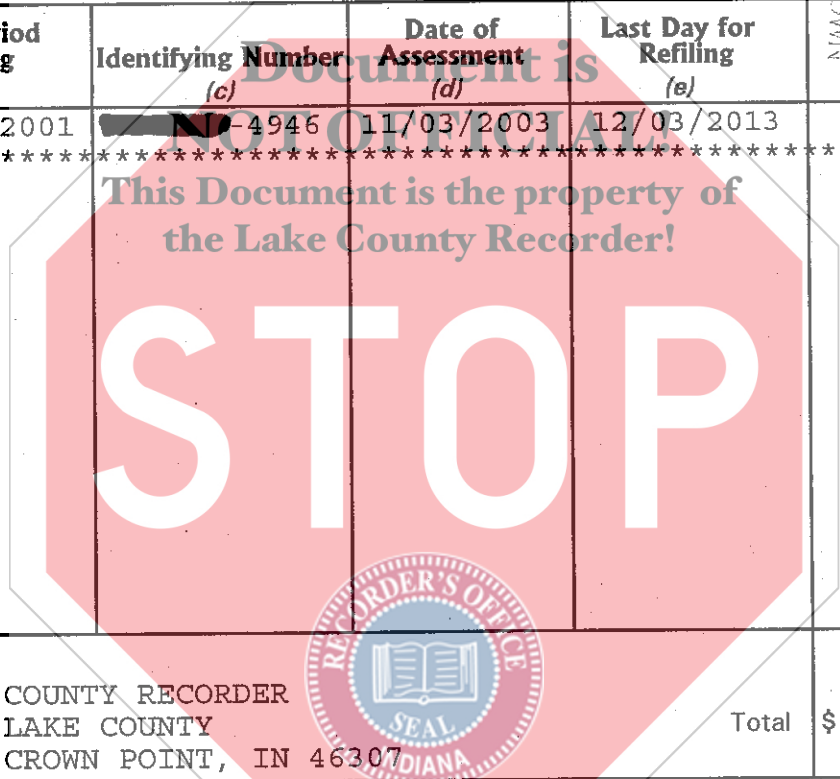
Residence PO BOX 146
 SCHNEIDER, IN 46376-0146

COURT RECORDING INFORMATION:
 Liber Page UCC No. Serial No.
 n/a n/a n/a 2005 025925

2006 015476

STATE OF INDIANA
 LAKE COUNTY
 FILED FOR RECORDING
 2006 FEB 28 AM 10:00
 MICHAEL A. BROWN
 RECORDER

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)
1040	12/31/2001	██████-4946	11/03/2003	12/03/2013	6047.94



Place of Filing
 COUNTY RECORDER
 LAKE COUNTY
 CROWN POINT, IN 46307

Total \$ 6047.94

This instrument was prepared by Susan A. Hansen, Internal Revenue Service.
 This notice was prepared and signed at ST PAUL, MN, on this, 13th the 15th day of February, 2006.

Signature R. A. Mitchell Title Director, Campus Compliance Operations
 Susan A. Hansen

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.

