_ - * - -Form 668 (Z)

(Rev. 10-2000)

1872

Department of the Treasury - Internal Revenue Service

Certificate of Release of Federal Tax Lien

For Use by Recording Office Serial Number Area: BUSINESS/SELF EMPLOYED AREA #4 SMALL 84047556 Lien Unit Phone: (800) 913-6050 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 _____ July 19 1985 , is authorized to note the books to show the release of this lien for these taxes and additions. Name of Taxpayer BENNIE L MOORE Residence 925 W 52ND DRIVE APT C63 MERRILLVILLE, IN 46410 COURT RECORDING INFORMATION: Serial No. UCC No. Liber Page 812208 n/a n/a n/a Unpaid Balans of Assessment Last Day for Tax Period Date of Identifying Number Assessment Refiling Kind of Tax **Ending** (f) (e) (b) (a) 02/18/1985 11539.09 -8127 03/20/1991 1040 12/31/1982 This Document is the property of the Lake County Recorder! Place of Filing COUNTY RECORDER Ś 11539.09 LAKE COUNTY Total CROWN POINT, IN 46307 This instrument was prepared by Susan A. Hansen, Internal Revenue Service. Indianapolis, /IN This notice was prepared and signed at 19th day of February Director, Campus Compliance Title Signature Operations Hansen Susan A.

(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

CAT. NO 600261

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.

