v. 10-2000)		Certificate of l	Release of Fed		
en Unit Phone	SS/SELF EMPLOY : (800) 913-605	ED AREA #4	al Number 134470903		by Recording Office
f the Internal F dditions. Ther dditions has be	Revenue Code has se efore, the lien provi- een released. The p e tax lien was filed o is authorized to not	expayer, under the requestisfied the taxes listed ded by Code section 63 roper officer in the officer in September the books to show the	below and all statute 21 for these taxes al ce where the notice of oer 25	nd f	18727
me of Taxpa	yer JOSEFINA P	EZEL			
					STATE FILED 7006 MAR MICHAE NICHAE
sidence 481 EAS	7 WALSH STR T CHICAGO,	EET IN 46312-3427			MAR -7
iber Pag n/a n,	4.5	RECORDING INFO Serial No. 2003 101898	ORMATION:		A BROW
ind of Tax	Tax Period Ending	Identifying Number	Date of Assessment 1	Last Day for Refiling	Unpaid Balance of Assessment (f)
<i>(a)</i> 1040	<i>(b)</i> 12/31/2000	-10-0372	06/04/2001	07/04/2011	5224.88 16002.13
1040 1040	12/31/2001 12/31/2002	1 - 0372 1 - 0372	07/01/2002	07/31/2012	6048.93
*****	*****	S L	townty Keco	rder!	
					\$ 27275.94
Place of Filing	COUN LAKE CROW	TY RECORDER COUNTY N POINT, IN 46	The state of the s	Total	
	COUN LAKE CROW	COUNTY N POINT, IN 40 prepared by St	usan A. Hanse		Revenue Service.
This inst	COUN LAKE CROW Trument was vas prepared and s	COUNTY N POINT, IN 46 prepared by S	The state of the s		

Susan A. Hansen

(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)

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:

- 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.

This Document is the preperty of the Lake Counsignature of Declarant

Printed Name of Declarant