

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

3229

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

2

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

Serial Number
359207813

For Use by Recording Office

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 May 22 1992, is authorized to note the books to show the release of this lien for these taxes and additions.

2006 020719

Name of Taxpayer
FRONICAL HARRIS

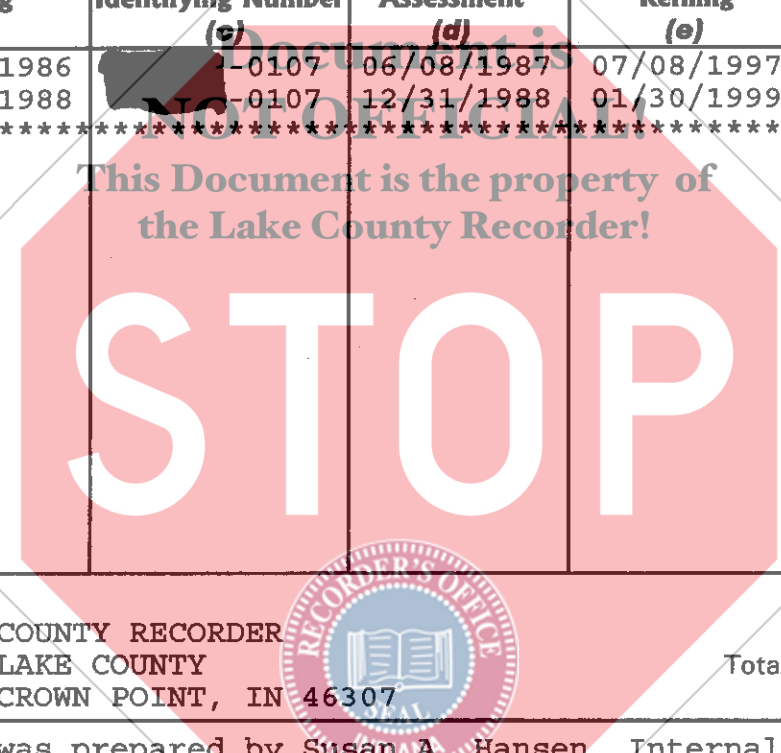
Residence 4651 LINCOLN ST
GARY, IN 46408-3850

COURT RECORDING INFORMATION:

Liber Page UCC No. Serial No.
n/a n/a n/a 92032875

2006 MAR 23 AM 9:42
FILED
LAKE COUNTY RECORDER
MICHIGAN TOWN

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	12/31/1986	0107	06/08/1987	07/08/1997	148.69
1040	12/31/1988	0107	12/31/1988	01/30/1999	194.98



Place of Filing	COUNTY RECORDER LAKE COUNTY CROWN POINT, IN 46307	Total \$	1943.67
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This instrument was prepared by Susan A. Hansen, Internal Revenue Service.
This notice was prepared and signed at Indianapolis, IN, on this, the 10th day of February, 2006.

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7778 B

Signature: *Susan A. Hansen*
Susan A. Hansen
Title: Director, Campus Compliance Operations

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.

