1872

Form 668 (Y)(c)

(Rev. February 2004)

Department of the Treasury - Internal Revenue Service

The state of the frequency internal records control

## **Notice of Federal Tax Lien**

For Optional Use by Recording Office Area: Serial Number SMALL BUSINESS/SELF EMPLOYED AREA #4 Lien Unit Phone: (800) 913-6050 270802306 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 MAURICE E CALLOWAY Residence PO BOX 179 GARY, IN 46402-0179 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). Tax Period Ending Last Day for Refiling Unpaid Balance Date of of Assessment Kind of Tax Identifying Number Assessment n(4) n1 (a) (b) (c) (o) (e) **(1)** XXX-XX-8489 XXX-XX-8489 XXX-XX-8489 08/14/2000 07/05/2004 06/14/2004 09/13/2010 08/04/2014 07/14/2014 91120.68 98790.601040 12/31/1999 1040 12/31/2000 12/31/2002 1040 33258.00 05/23/2005 006/22/2015 1040 12/31/2004 XXX-XX-8489 16072.64 6702 12/31/2002 XXX-XX-8489 12/31/2013 500.00 Place of Filing COUNTY RECORDER LAKE COUNTY 129741.92 CROWN POINT, IN 46307 This instrument was prepared by Susan A. Hansen, Internal Revenue Service. MN ST PAUL. This notice was prepared and signed at  $^{26 ext{th}}$  day of  $\_$ January 2006 Campus Compliance Signature Title Director, Operations 24-09-1835 Hansen

(NOTE: Certificate of officer authorized by law to take acknowledgment is not essential to the validity of Notice of Federal Tax lien Rev. Rul. 71-466, 1971 - 2 C.B. 409)

Part 1 - Kept By Recording Office

Form **668(Y)(c)** (Rev. 2-2004) CAT. NO 60025X Prescribed by the State Board of Accounts (2005)

7 (4.7)

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:
  - 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.

This Document is the Lake County Signature of Declarant

Printed Name of Declarant