Form 668 (Z)

(Rev. 10-2000)

Susan A

10968

Department of the Treasury - Internal Revenue Service

Certificate of Release of Federal Tax Lien

For Use by Recording Office Serial Number Area: WAGE & INVESTMENT AREA #2 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 July 28 internal revenue tax lien was filed on _ , is authorized to note the books to show the release of this lien for these taxes and additions. Name of Taxpayer FRANK CAMP JR Residence 13426 DEWEY ST CEDAR LAKE, IN 46303-9552 COURT RECORDING INFORMATION: UCC No. Serial No. Page Liber n/a 2003 077915 n/a n/a Last Day for Refiling Unpaid Balance Tax Period Date of of Assessment Identifying Number Kind of Tax Assessment Ending 79 (b) (c) 🔳 (a) 9945 04/19/1999 05/19/2009 1040 12/31/1995 景083.40 97442.9506/23/2009 12/31/1996 1040 ****** ***** This Document is the property of the Lake County Recorder! Place of Filing COUNTY RECORDER LAKE COUNTY Total 15526.35 CROWN POINT IN 46307 This instrument was prepared by Susan A. Hansen, Internal Revenue Service. ST PAUL, This notice was prepared and signed at 27th day of January Director, Operations Title Campus Compliance Signature usan a. Hanser

(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)

Part 1 - RECORDING OFFICE

Form 668 (Z) (Rev. 10-2000) CAT. NO 600261 Prescribed by the State Board of Accounts (2005)

County Form 170

Declaration

(J. 7)

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.

