

**Notice of Federal Tax Lien**

Area: SMALL BUSINESS/SELF EMPLOYED AREA #4 Lien Unit Phone: (800) 829-3903	Serial Number 277859206	For Optional Use by Recording Office 2006 022345
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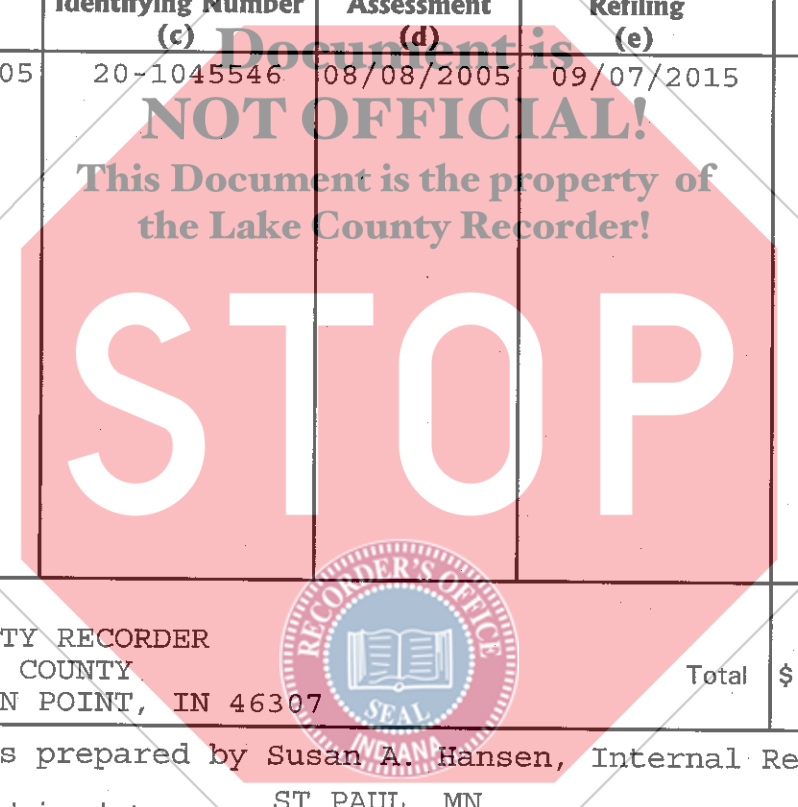
As provided by section 6321, 6322, and 6323 of the Internal Revenue Code, we are giving a notice that taxes (including interest and penalties) have been assessed against the following-named taxpayer. We have made a demand for payment of this liability, but it remains unpaid. Therefore, there is a lien 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 I MAX ELECTRIC INC

Residence 16805 BROADWAY ST  
LOWELL, IN 46356-7105

**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).

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)
941	03/31/2005	20-1045546	08/08/2005	09/07/2015	6059.81



Place of Filing COUNTY RECORDER LAKE COUNTY CROWN POINT, IN 46307	Total \$	6059.81
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This instrument was prepared by Susan A. Hansen, Internal Revenue Service.

This notice was prepared and signed at ST PAUL, MN, on this,

the 07th day of March, 2006.

Signature <i>R. A. Mitchell</i> Susan A. Hansen	Title Director, Campus Compliance Operations 24-00-0008
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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.

