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Area: SMALL BUSINESS/SELF EMPLOYED AREA #4
 Lien Unit Phone: (800) 913-6050
 Serial Number: 275776706
 For Optional Use by Recording Office

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.

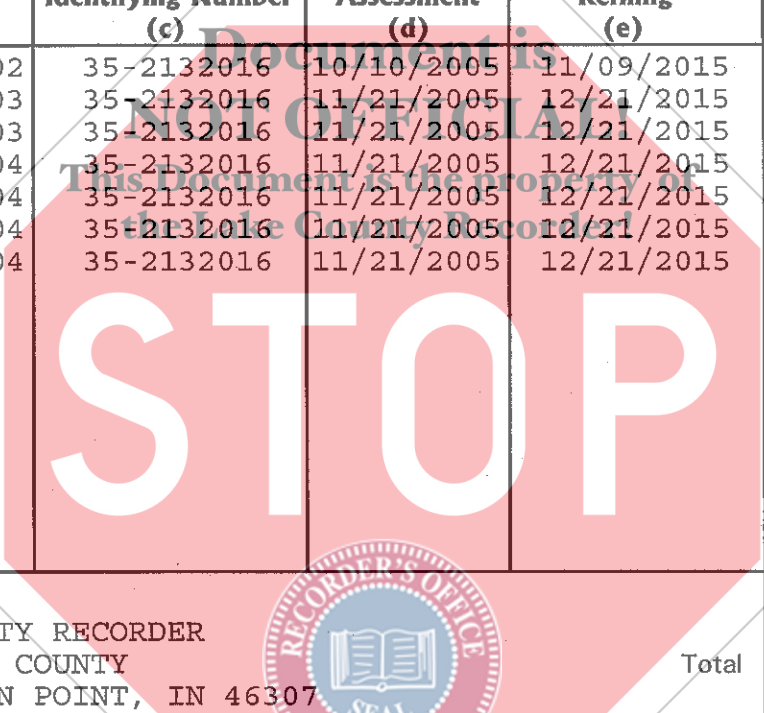
Name of Taxpayer GWE CONSULTING INC , a Corporation
 Residence 1023 BOXWOOD DR
 MUNSTER, IN 46321-2842

2006 023021

STATE OF INDIANA
 LAKE COUNTY
 FILED
 2006 MAR 19 9:33
 MICHAEL BROWN
 RECORDER

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)
6721	12/31/2002	35-2132016	10/10/2005	11/09/2015	13263.10
940	12/31/2003	35-2132016	11/21/2005	12/21/2015	89.68
941	12/31/2003	35-2132016	11/21/2005	12/21/2015	33607.93
941	03/31/2004	35-2132016	11/21/2005	12/21/2015	4002.45
941	06/30/2004	35-2132016	11/21/2005	12/21/2015	4018.43
941	09/30/2004	35-2132016	11/21/2005	12/21/2015	4034.04
941	12/31/2004	35-2132016	11/21/2005	12/21/2015	4040.66



Place of Filing: COUNTY RECORDER, LAKE COUNTY, CROWN POINT, IN 46307
 Total \$ 33056.29

This instrument was prepared by Susan A. Hansen, Internal Revenue Service.
 This notice was prepared and signed at ST PAUL, MN, on this, the 22nd day of February, 2006.

Signature: *R. A. Mitchell*
 Title: Director, Campus Compliance Operations 24-09-1863
 Susan A. Hansen

12-DG
 1968

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 forgoing declarations are true.

