

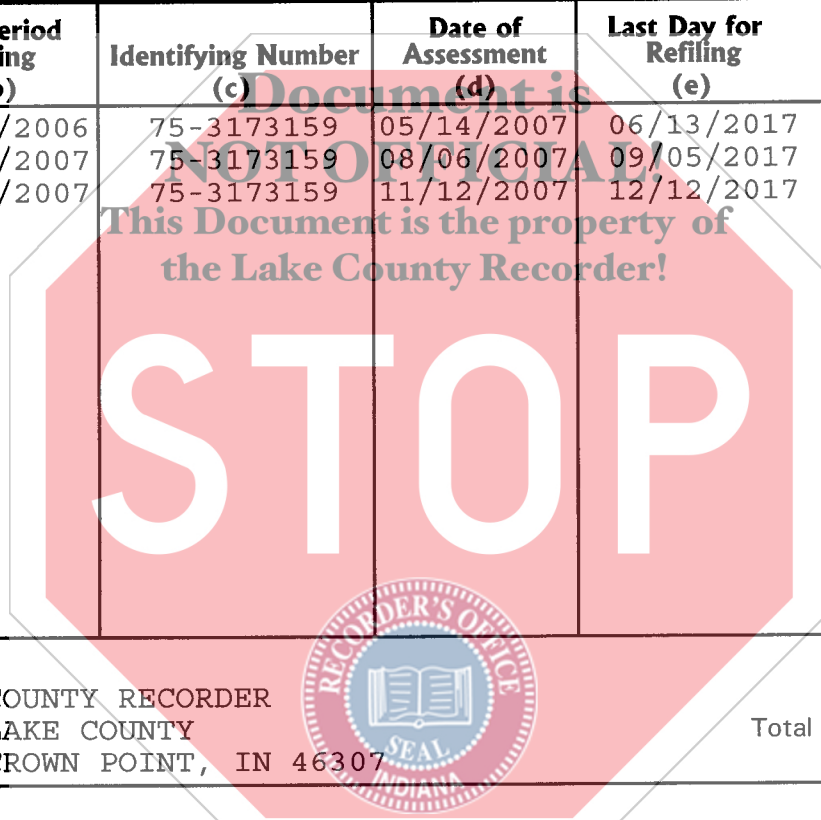
Area: SMALL BUSINESS/SELF EMPLOYED AREA #4 Serial Number: 408012807  
 Lien Unit Phone: (800) 913-6050 For Optional Use by Recording Office

**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 COMFORT HOME HEALTH CARE INC , a Corporation  
 Residence 9212 INDIANAPOLIS BLVD  
 HIGHLAND, IN 46322-2506

**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	12/31/2006	75-3173159	05/14/2007	06/13/2017	7990.96
941	03/31/2007	75-3173159	08/06/2007	09/05/2017	1672.06
941	06/30/2007	75-3173159	11/12/2007	12/12/2017	1548.30
Place of Filing COUNTY RECORDER LAKE COUNTY CROWN POINT, IN 46307					Total \$ 11211.32



2007 098466  
 2007 10 11 9:20  
 REC'D  
 COUNTY RECORDER  
 CROWN POINT, IN

This notice was prepared and signed at ST PAUL, MN, on this, 06th day of December, 2007.

Signature: R. A. Mitchell Title: REVENUE OFFICER  
 for THOMAS R GUNTHER (219) 736-2668 24-09-1810

*5498 12-5-06*