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APN# None

DOC # **0690454**
12/12/2006 08:35 AM Deputy: SD
OFFICIAL RECORD
Requested By:
I R S

Recording Requested by:

Name: Internal Revenue Service
Address: PO Box 145595 Stop #8240-G
City/State/Zip: Town 206
Cincinnati, OH 45250-5595

Douglas County - NV
Werner Christen - Recorder
Page: 1 Of 2 Fee: 15.00
BK-1206 PG-3544 RPTT: 0.00



When Recorded Mail to:

Name: _____
Address: _____
City/State/Zip: _____

(for Recorder's use only)

Mail Tax Statement to:

Name: _____
Address: _____
City/State/Zip: _____

Notice of Federal Tax Lien
(Title of Document)

Please complete Affirmation Statement below:

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the social security number of any person or persons. (Per NRS 239B.030)

-OR-

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does contain the social security number of a person or persons as required by law: 26 U.S.C. (b)(3)(F)(3) & Treas. Reg. 301.6323(f)-1(d)
(State specific law)

Lori Minnich Manager
Signature Title

Lori Minnich
Print Signature

This page added to provide additional information required by NRS 111.312 Sections 1-2 and NRS 239B.030 Section 4.

This cover page must be typed or printed in black ink.

(Additional recording fee applies)

1075

Department of the Treasury - Internal Revenue Service

Form 668 (Y)(c)

(Rev. February 2004)

Notice of Federal Tax Lien

Area: SMALL BUSINESS/SELF EMPLOYED AREA #6 Lien Unit Phone: (800) 913-6050	Serial Number 319820706	For Optional Use by Recording Office
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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. a Corporation

Name of Taxpayer CARSON VALLEY EYECARE INCORPORATED

Residence PO BOX 301
ZEPHYR COVE, NV 89448-0301

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)
940	12/31/2004	20-0843049	08/14/2006	09/13/2016	721.50
941	06/30/2004	20-0843049	08/14/2006	09/13/2016	6774.18
941	09/30/2004	20-0843049	08/21/2006	09/20/2016	5527.91
941	06/30/2005	20-0843049	08/14/2006	09/13/2016	5848.22
941	09/30/2005	20-0843049	08/21/2006	09/20/2016	1448.60
Place of Filing COUNTY RECORDER DOUGLAS COUNTY MINDEN, NV 89423					Total \$ 20320.41

This notice was prepared and signed at DENVER, CO, on this,

the 28th day of September, 2006.



BK- 1206
PG- 3545

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Signature *R. A. Mitchell*
for KELLY GURNEY

Title
REVENUE OFFICER 26-07-3730
(775) 325-9334

(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