APN# NONE	DOC # 0694313 02/05/2007 10:15 AM Deputy OFFICIAL RECORD Requested By: IRS
Recording Requested by: Name: Tylenn Penenue Service Address: PD Pox 145595 5100 #8240-6) City/State/Zip: Tenn 206	Douglas County - NV Werner Christen - Recorder Page: 1 Of 2 Fee: 1 BK-0207 PG-00760 RPTT:
Cincinnuti, OH 45250-5595 When Recorded Mail to: Name:	
Address:City/State/Zip:	(for Recorder's use only)
Mail Tax Statement to: Name: Address: City/State/Zip:	
(Title of Document) Please complete Affirmation Statemen	Tax Lien
I the undersigned hereby affirm that the attached document, i submitted for recording does not contain the social security number of NRS 239B.030) OR- I the undersigned hereby affirm that the attached document, i	f any person or persons. (Per including any exhibits, hereby
submitted for recording does contain the social security number of a p law: <u>Ale 11.5. C.</u> (1323 (+) (3) 4 Treas, Reg. 36 (State specific law) Signature Title	oerson or persons as required by (1.0323(4)-1(d))
Print Signature This are added to provide additional information and a NRS 111 212	Post 1.0
This page added to provide additional information required by NRS 111.312 and NRS 239B.030 Section 4. This cover page must be typed or printed in black ink. (Additional information required by NRS 111.312 and NRS 239B.030 Section 4.	Sections 1-2 ditional recording fee applies)

15.00 0.00 1075

Form 668 (Y)(c)

Department of the Treasury - Internal Revenue Service

Notice of Federal Tax Lien

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(Rev.	Fe	ebru	Jary	2	20	0	4	ì

Area: Serial Number

SMALL BUSINESS/SELF EMPLOYED AREA #6 Lien Unit Phone: (800) 913-6050

320226606

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 MARK W BRISCOE

for PHIL MANDICHAK

Residence

PO BOX 11007

ZEPHYR COVE, NV 89448-3007

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)
1040	12/31/2004	XXX-XX-6354	05/15/2006	06/14/2016	15831.15
Place of Filing	COUNTY DOUGLA	RECORDER S COUNTY , NV 89423		Total	\$ 15831.15

This notice was prepared and signed at	DENVER, CO	, on this,
theO2nd day of _October 2000		BK- 0207 PG- 761 02/05/2007
Signature K. A. Mutchell	Title REVENUE OFFICER	26-07-3772

(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)

(775)

325-9337