

Notice of State Tax Lien Discharge, Release, or Subordination

* Read instructions on reverse side

Lien Serial Number 1/08/896	Release Serial Number 6077	Date of Lien 8-24-81	Social Security Number 506-46-0968	83-002271
Nebraska I.D. Number 3433994	County Hall	Lien Filed With <input checked="" type="checkbox"/> Register of Deeds <input type="checkbox"/> County Clerk	Spouse's Social Security Number	

BUSINESS NAME AND LOCATION ADDRESS			TAXPAYER NAME AND MAILING ADDRESS		
Business Name Mr. Kitchen			Name Dale Miller		
Street Address 639 South Locust			Street or Other Mailing Address 639 South Locust		
City Grand Island,	State NE	Zip Code 68801	City Grand Island,	State NE	Zip Code 68801

Pursuant to the revenue laws of the State of Nebraska, notice is hereby given that the Notice of State Tax Lien which has been duly filed against the above named taxpayer, is discharged, partially released, or subordinated to the extent indicated below.

TYPE OF ACTION

- DISCHARGE TAX LIEN.** The Notice of State Tax Lien is hereby fully discharged.
- PARTIAL RELEASE.** The Notice of State Tax Lien is released as follows

- SUBORDINATED.** The Notice of State Tax Lien is subordinated as follows

I hereby certify that the Nebraska Department of Revenue has complied with the revenue laws of the State of Nebraska in the determination of the discharge, partial release or subordination indicated above.

sign here

Gideon Stroth
Preparer's Signature

Revenue Agent

5-5-83

Dwayne S. Craft
Authorized Signature

Special Agent

5-5-83

FOR COUNTY OFFICIAL'S USE

Entered as Document No.

83-002271

Grantor *[Signature]*
Grantee *[Signature]*
Number *[Signature]*

STATE OF NEBRASKA) SS
COUNTY OF ALL)

83 MAY 6 AM 9 51

[Signature]
REG OF DEEDS

*(Not in view)
Mrs. Mabel A. Korman
203 J. Street*