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 Illinois Department of Revenue
ECR-3 Notice of Tax Lien

July 12, 1995

**LEKAS & BRAUN INC
8822 BENNETT AVE
EVANSTON IL 60203-1901**

IBT No: 0821-9125
Fein No.: 36-2417719 000
SSN:
Excise Tax ID:
County code: 016
County name: Cook
Lien ID: 9519312252701
Status: Discontinued
Tax type: ROT

95489753

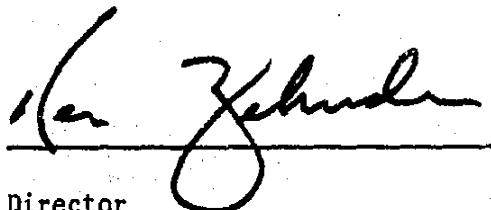
DEPT-02 FILING \$23.00
T#0012 TRAN 5457 07/27/95 08:34:00
#2261 # JM *-95-489753
COOK COUNTY RECORDER

For official recording use only

This notice of tax lien is being issued based on the various tax acts administered by the Illinois Department of Revenue and in accordance with the provisions of the Illinois Compiled Statutes because the taxpayer named on this notice owes the Illinois Department of Revenue the following amount:

Total tax, penalty, and interest \$ 2,749.30

Each unpaid assessment, or notice of tax liability that is included in this total is listed by tax type and identifying number on the attached document(s). The total tax, penalty, and interest shown, plus any interest that accrues is a lien in favor of the Illinois Department of Revenue on all real and personal property that is currently owned or hereafter acquired by the taxpayer named on this notice. This lien will remain until the total tax, penalty, and interest is paid.



Director

ILLINOIS DEPARTMENT OF REVENUE
LIEN UNIT
PO BOX 19035
SPRINGFIELD IL 62794-9035
217 782-5982

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Listed below are the tax types and identifying numbers of the assessments, and notices of liability that make up the total tax, penalty, and interest due on this notice of tax lien. Lien ID: **9519312252701**

Retailers Occupation Tax

S B 9312685804001 S B 9312685804002 S G 9223889519051 S G 9223889519063

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Supplemental Report Form 3-403

1. Name of the person or organization that is the subject of the report: _____
2. Address of the person or organization: _____
3. City and State: _____
4. Date of report: _____
5. Name of the person reporting: _____
6. Title of the person reporting: _____
7. Organization of the person reporting: _____
8. Address of the person reporting: _____
9. City and State of the person reporting: _____
10. Date of report: _____

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11-11-11

11-11-11