THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1, DEBTOR NAME to be searched - most drifty one sector name (1a or 1b) - do no abbreviate or combine names 1 to ROMOBUAS LAST NAME THE THANK OFFICE THAT INCLUDE AS A DEBTOR NAME SUFFIX James 2, INFORMATION REQUEST RESPONSE WITHOUT COPIES — Firing office requested to furnish a search report listing all reported records, but to furnish NO COPIES of reported records. 20, COPY REQUEST CENTIFIED (Optional) 21 SPECIALS ONLY Date Record Number Date Record Field (6 sequired) Type of Record and Additional Identifying Information (if required).	INFORMATION REQUES FOLLOW INSTRUCTIONS (front A. NAME & PHONE OF CONTACT [Option Robert J. Donnelly 401-7 B. RETURN TO: [Name and Address] Robert J. Donnelly, 28 Caswell Street Narragansett, RI 02	t and back) CAREFULLY pail Filing OFFICE AT 89-7800 Esq.	CCT#			
1. DEBTOR NAME to be searched -meet only one debtor name (1a or 1b) - do no abbreviate or combine names 15. ORGANIZATIONS READ THANKE 16. INDIVIDUAL'S LAST HAWE CONWAY 2. INFORMATION OPTIONS RELATING TO USE PLINGS & OTHER NOTICES ON FILE IN FILING OFFICE THAT INCLUDE AS A DEBTOR NAME THE NAME IDENTIFIED IN TEM 1: 2.2. SEARCH RESPONSE INFORMATION REQUEST RESPONSE WITHOUT COPIES — Filing office requirement to furnish a search report likeling all reported records, our to furnish NO COPIES of reported records. 26. COPY REQUEST OFFICE OFFICE OCCUPY OF ALL reported records (including all allactments and related records showing date and time of filing and name and address of each Secured Party hamed theren, and also furnish an exact COPY of ALL reported records (including all allactments). 26. SPECIFIED COPIES ONLY OCRITICISED (Optional) Record Number Date Record Field at required) Type of Record and Additional Identifying Information (if required) 3. ADDITIONAL SERVICES	L	.002		IF ADOVE ORACE	10 FOR EU ING OFFI	as uos ovuv
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3. ADDITIONAL SERVICES	☑ INFORMATION REQUEST RES date and time of filing and name and addr	SPONSE WITH FULL COPIES — Filiness of each Secured Party named therein.	ng office requested to furni and also furnish an exact	sh a search report listing COPY of ALL reported re	all financing statements and secords (including all attachm	d related records showing ients).
	Record Number	Date Record Filed (if required)	Type of Record	and Additional Ident	fying Information (if requ	uired)
4. DELIVERY INSTRUCTIONS (request will be filled by mall sent to address shown in item B unless otherwise instructed here):		st will be filled by mail sent to address sho	wn in item B unless otherv	vise instructed here):		