NFORMATION REQU DLLOW INSTRUCTIONS (fron		REFULLY						
. NAME & PHONE OF CONTACT [Optic Rich (732-2490)	nal]	FILING OFFICE AC	CCT#					
ParaSearch, Inc.								
L				THE ABOVE	SPACE IS FOR FILING	OFFICE USE ON	ILY	
DEBTOR NAME to be searched - ins [1a. ORGANIZATION'S NAME]	ert only one debtor r	name (1a or 1b) - do no	abbreviate or	combine names				
Referral Mortgage, Inc. (RMI) 1b. INDIVIDUAL'S LAST NAME			FIRST NAME		MIDDLE NAME	su	JFFIX	
b. COPY REQUEST INFORMATION REQUEST REstate and time of filing and name and add SPECIFIED COPIES ONLY	SPONSE WITH F ress of each Secure						is show	
Record Number	Date Record Filed (if required)			Type of Record and Additional Identifying Information (if required)				
ADDITIONAL SERVICES			1					
, 100 / 101 WE 02 (
DELIVERY INSTRUCTIONS (requ	est will be filled by m	nail sent to address sho	own in item B u	nless otherwise instructe	d here):			
4a. Pick Up								
4b. Other Specify desired method here (if ave	ulable from this office)	; provide delivery informa	ition (e.g., delive	y service's name, address	ee's account# with delivery service,	addressee's phone#, of	lc.)	