INFORMATION REQU FOLLOW INSTRUCTIONS (front A. NAME & PHONE OF CONTACT [Option CJ B. RETURN TO: [Name and Address]  ParaSearch	and back) CAREFULLY	CE ACCT#			
DEBTOR NAME to be searched - inser	t only one debtor name {1a or 1b) -	do no abbreviate o	<u></u>	SPACE IS FOR FILING OFFI	CE USE ONLY
1a. ORGANIZATION'S NAME					
OR 16. INDIVIDUAL'S LAST NAME			iE	MIDDLE NAME	SUFFIX
INFORMATION REQUEST RESE date and time of filing and name and addre	PONSE WITH FULL COPIES — ss of each Secured Party named the	– Filing office reque erein, and also fum	ested to furnish a search re iish an exact COPY of ALL	port listing all financing statements and reported records (including all attachme	I related records showing ents).
date and time of filing and name and addre	ss of each Secured Party named the	erein, and also fum	ish an exact COPY of ALL	port listing all financing statements and reported records (including all attachments) and Identifying Information (if requ	ents).
2c. SPECIFIED COPIES ONLY	GERTIFIED (Optional)	erein, and also fum	ish an exact COPY of ALL	reported records (including all attachm	ents).
2c. SPECIFIED COPIES ONLY	GERTIFIED (Optional)	erein, and also fum	ish an exact COPY of ALL	reported records (including all attachm	ents).
2c. SPECIFIED COPIES ONLY	GERTIFIED (Optional)	erein, and also fum	ish an exact COPY of ALL	reported records (including all attachm	ents).
2c. SPECIFIED COPIES ONLY	GERTIFIED (Optional)	erein, and also fum	ish an exact COPY of ALL	reported records (including all attachm	ents).