



STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

INFORMATION REQUEST
FOLLOW INSTRUCTIONS (front and back) CAREFULLY

2005 000112

2005 FEB 10 AM 10:05

MICHAEL S. BROWN
REC'D 10/5

A. NAME & PHONE OF CONTACT (optional)	FILING OFFICE ACCT #
B. RETURN TO: (Name and Address)	
Precise Title, LLC 8917 24 th Street DeMotte IN 46310	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR NAME to be searched - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME			
Kropp Equipment			
OR	1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME
			SUFFIX

2. INFORMATION OPTIONS relating to UCC filings and other notices on file in the filing office that include as a Debtor name the name identified in item 1:

2a. SEARCH RESPONSE CERTIFIED (Optional)
 Select one of the following two options: ALL (Check this box to request a response that is complete, including filings that have lapsed.) UNLAPSED

2b. COPY REQUEST CERTIFIED (Optional)
 Select one of the following two options: ALL UNLAPSED

2c. SPECIFIED COPIES ONLY CERTIFIED (Optional)

Record Number	Date Record Filed (if required)	Type of Record and Additional Identifying Information (if required)

3. ADDITIONAL SERVICES:

Shu 2/9/05

4. DELIVERY INSTRUCTIONS (request will be completed and mailed to the address shown in item B unless otherwise instructed here)

4a. Pick Up
 4b. Other

Request checked method here if available from this office; complete delivery information for delivery address's name, address, and phone number with delivery person's name and phone number.