				van karan seri a	indus e						
INFORMATION REQUEST FILIP FIFE CONTACT (optional) Caroline DeVries 219-987-4141				FILED FOR PECON 2005 APR -6 PM 1: 23							
						BORETURN TO: (Name and Address)	2			AMPLIATI & C	D/MAIL:
										MICHAT: 4 1 RELUE	~13
DeMotte State Bank Caroline DeVries											
P.O. Box 400											
DeMotte, IN 46310											
		-		- 00 4 0	OF USE ONLY						
1DDEBTOR NAME to be searched - insert or	nly <u>one</u> debtor name (1a d	or 1b) - do not abbrevia		E SPACE IS FOR FILING OFFI	CEUSEONLY						
1aCORGANIZATION'S NAME	,										
OR 16UNDIVIDUAL'S LAST NAME		FIRST NAMI		MIDDLE NAME	SUFFIX						
KRITLOW	:		RON								
2 DNFORMATION OPTIONS relating to U	ICC filings and other n ED (Optional)	otices on file in the	filing office that include as	a Debtor name the name ident	ifled in item 1:						
Select one of the following two options		his box to request a	response that is complete	, including filings that have laps	sed0) UNLAPSE						
	ED (Optional)	E IN ABORD									
Select one of the following two options 2cDSPECIFIED COPIES ONLY	CERTIFIED (Options	X UNLAPSED									
	CERTIFIED (Options	ai <i>)</i>									
Record Number	Date Record	Filed (if required)	Type of Record and Ad	lditional Identifying Informat	ion (if required)						
			at A:	7.0							
			Nothing o	n file							
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DDELIVERY INSTRUCTIONS (request will be	completed and mailed to	the address shown in	item 8 unless otherwise instr	icted here):							
4aC Pick Up	:										
4bC Other	his from this office):ide	delivery information (all	Odolizani sanina's name addres	see's account # with delivery service, ac	ddressee's phone #, etc0						