FORMATION REQUEST  LLOW INSTRUCTIONS (front and back) CARE  JNAME & PHONE OF CONTACT [optional]	:=:::: 200F		LAKE FILED FO	II. KEUUN.
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INAME & PHONE OF CONTACT [optional]		000563	2005 JUN 21	) AM 9:02
		MICHAEL E EROWN FOR A		
H&P Sales & Ser 399 E US 30 Valparaiso, IN				
DEBTOR NAME to be searched - insert only on	ne debtor name (1a or 1b) - do no		BOVE SPACE IS FOR FILING OF	FICE USE ONLY
1aEDRGANIZATION'S NAME	<u> </u>			
15UNDIVIDUAL'S LAST NAME VanDeursen	FI	rstname Barry	MIDDLE NAME  L	SUFFIX
Select one of the following two options:  2c SPECIFIED COPIES ONLY  CE	ALL YNLERTIFIED.(Optional)	APSED		
Record Number	Date Record Filed (if a	required) Type of Record an	nd Additional Identifying Inform	ation (if required)
ADDITIONAL SERVICES:				
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