				LAKE COUN FILED FOR REA	A T
				FILED FOR REI	icki.
INFORMATION REQUEST				2005 AUG 1 1 PM 3: 38	
FOLLO	OW INSTRUCTIONS (front and back) CA NAME & PHONE OF CONTACT [option		009724		
	Diane S. Osburn	715110 01 2 (0 70° 5)	0001-	MICHAEL A. BROWN RECORDED	
В.	RETURN TO: (Name and Address)			RECORDER	
	Farm Credit Services	I			
	P O Box 1160				
	Valparaiso IN 46384-1160				
			THE A	DOVE SDACE IS EOD EII INC OFFICE	TICE ONLY
1. DE	BTOR NAME to be searched - insert only	one debtor name (1a or 1b) - do not abbre		BOVE SPACE IS FOR FILING OFFICE	USE ONL I
ï	1a. ORGANIZATION'S NAME	<u> </u>		-	
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
	Little		John	MIDDLE NAME K	0
2. INI	FORMATION OPTIONS relating to UCC	filings and other notices on file in the filing	g office that include as a Debtor r	name the name identified in item 1:	
2		TIFIED (Optional)			_
	Select one of the following two options		uest a response that is complete,	including filings that have lapsed.)	☑ UNLAPSED
2	 b. COPY REQUEST	TIFIED (Optional) s: □ ALL □ UNLAPS	ED		
2		CERTIFIED (Optional)			
			I		
	Record Number	Date Record Filed (if required)	Type of Record and Additional	I Identifying Information (if required)	
				-	
3. AD	DITIONAL SERVICES:	_			
Pleas	e also search Janet W. Little				
	•				
				^	
				Thru 8-10-09	
,	Wilder Charles and	1,1,1,9,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1			7
	LIVERY INSTRUCTIONS (request will be Pick Up	e completed and mailed to the address sho	wn in item B unless otherwise ins	structed here):	
	Other				
	Specify desired method he addressee's phone #, etc.)		lelivery information (e.g., deliver	y service's name, addressee's account # wit	h delivery service,