

219-648-6028

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2005 AUG 29 AM 11:01

MICHAEL J. STONER  
REC'D

**INFORMATION REQUEST**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

2005 000781

A. NAME & PHONE OF CONTACT (optional) 219-331-6861 FILING OFFICE ACCT#

Rachel Cappuccio

B. RETURN TO: (Name and Address)

Lake County AB Strators  
1800 E 23rd AVE,  
Merrillville IN,  
46410

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

OR

1b. INDIVIDUAL'S LAST NAME Ewen FIRST NAME marie MIDDLE NAME Elizabeth 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)

*nothing on file*

3. ADDITIONAL SERVICES:

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 Call Rachel at 219-331-6861 when done Thankyou!

Specify desired method here (if available from this office); provide delivery information (e.g., delivery service's name, addressee's account # with delivery service, addressee's phone #, etc.)

Rachel