INFORMATION REQUEST
FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A☐NAME & PHONE OF CONTACT [optional]	FILING OFFICE ACCT #
Sarah 219-462-2108	2005 000880

B☐RETURN TO: (Name and Address)

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H&P Sales & Service, Inc.
399 E US 30
Valparaiso, IN 46383
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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2005 SEP 30 PM 2: 51

MICHAEL A. BROWN
RECORDER

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1☐DEBTOR NAME to be searched - insert only <u>one</u> debtor name (1a or 1b) - do not abbreviate or combine names

1a☐ORGANIZATION'S NAME

OR

1b☐INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
Radu	George	R	

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 <u>one</u> 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 <u>one</u> 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:

Ann 9/29/05

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