

INFORMATION REQUEST

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A NAME & PHONE OF CONTACT (optional) Holly at ITN 662-8200	FILING OFFICE ACCT # 2005 000976
B RETURN TO: (Name and Address) Indiana Title Network 825 N. Main St. Crown Point, IN 46037 File # 34390 File # 34389	

STATE OF INDIANA
 LAKE COUNTY
 FILED FOR RECORD
 2005 NOV -8 AM 9:44
 MICHAEL A. BROWN
 RECORDER

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 CLARCO INC				
OR	1b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	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)
2004-1117	11-19-04	UCC
2004-402	4-22-04	UCC

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

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.)