

NOT AN OFFICIAL DOCUMENT



INFORMATION REQUEST

State Form 56241 (4-13)

FOLLOW INSTRUCTIONS.

A. NAME(S), PHONE OR CONTACT AT FILER (optional) <i>Andrea</i>		FILING OFFICE ACCT #
B. E-MAIL CONTACT AT FILER (optional)		
C. RETURN TO: (Name and Address) <i>Asks Services</i>		GINA PIMENTEL RECORDER 2022-012827 STATE OF INDIANA LAKE COUNTY FILED FOR RECORD 12:27 PM 2022 Apr 12
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY.		

1. DEBTOR'S NAME to be searched: Provide only one Debtor name (1a or 1b) (Use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name.)

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S SURNAME
Halak

INDIVIDUAL'S FIRST PERSONAL NAME
Douglas

INDIVIDUAL'S ADDITIONAL NAME(S) (INITIALS)

SUFFIX

2. INFORMATION OPTIONS relating to UCC filings and other notices on file in the filing office that include the Debtor 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 (# required)	Type of Record and Additional Identifying Information (# required)

3. ADDITIONAL SERVICES:

Nothing on file as of 10/31/00,

cash

4. DELIVERY INSTRUCTIONS (Request will be completed and mailed to the address shown in Item C unless otherwise instructed here.):

- 4a. Pick Up
- 4b. Other

expressretrieval@aol.com

\$25.00

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