

# NOT AN OFFICIAL DOCUMENT



## INFORMATION REQUEST

State Form 55241 (4-13)

FOLLOW INSTRUCTIONS.

A. NAME & PHONE OF CONTACT AT FILER (optional) <b>(312) 383-1651</b>	FILING OFFICE ACCT #
B. E-MAIL CONTACT AT FILER (optional)	
C. RETURN TO: (Name and Address) <input type="checkbox"/> <b>Dirk J Williams Jr.</b> <b>320 N Jay St. Griffith, Indiana</b>	

**GINA PIMENTEL**  
**RECORDER**  
**2023-026039**  
**STATE OF INDIANA**  
**LAKE COUNTY**  
**RECORDED AS PRESENTED**  
**10:34 AM 2023 Sep 11**

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  
**DIRK J WILLIAMS, JR**

OR

1b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

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 (if required)	Type of Record and Additional Identifying Information (if required)

3. ADDITIONAL SERVICES:

Nothing on file as of 10/31/20.

\$25.00  
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

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.)

International Association of Commercial Administrators (IACA)