## UNIFORM COMMERCIAL CODE REQUEST FOR INFORMATION OR COPIES

## IMPORTANT-Read instructions on back before completing form REQUEST FOR INFORMATION OR COPIES. Present in duplicate to Filing Office

[] INFORMATION REQUEST. Filing officer, please furnish certificate showing whether there is on file any presently effective financing statement naming the Debtor listed below and any statement of assignment thereof, and if there is, giving the date and hour of filing of each such statement and the names and addresses of each secured party named therein.

1A. DEBTOR NAME: (Last name, First)

1B. Mailing Address:

1C. City, State/Territory

1D. Zip Code

1F.

Date:

Signature of Requesting Party

Name of Requesting Party & Print Name of Signer

2. CERTIFICATE:		
File Number:	DATE AND HOUR OF FILING	NAME(S) AND ADDRESS(ES) OF SECURED PARTY(IES) AND ASSIGNEE(S), IF ANY

The undersigned filing officer hereby certifies that the above listing is a record of all presently effective financing statements and statements of assignment which name the above debtor and which are on file in my office as of \_\_\_\_\_\_\_ at \_\_\_\_\_\_ am/pm.

\_\_\_\_\_, 20\_\_\_\_\_

(Filing Officer) By\_\_\_\_\_

3. [ ]COPY REQUEST. Filing officer please furnish \_\_\_\_\_ copy(ies) of each page of the following statements concerning debtors listed below: [ ]Financing Statements [ ]Amendments [ ]Statements of Assignments [ ]Continuation Statements [ ]Statement of Release [ ]Termination Statements [ ]All Statements on file

File Number:	DATE AND HOUR OF FILING	NAME(S) AND ADDRESS(ES) OF SECURED PARTY(IES) AND ASSIGNEE(S), IF ANY

Date: \_\_\_\_\_

Signature of Requesting Party

Name of Requesting Party & Print Name of Signer

4. Certificate:

The undersigned filing officer hereby certifies that the attached copies are true and exact copies of all statements requested above.

Date: \_\_\_\_\_

(Filing Officer)

Ву\_\_\_\_