DELAWARE COUNTY IOWA
FILED
2002 MY 15 AM 10:28
BOOK 2002 PAGE 1877
DEBORAH L. FEYTON
DELAWARE CO. RECORDER
5.00

INFORMATION REQUEST

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A□NAME & PHONE OF CONTACT [optional]	FILING OFFICE ACCT #
Jeffrey L. Walters	

B□RETURN TO: (Name and Address)

(x) ENW
Jeffrey L. Walters
Reynolds & Kenline, L.L.P.
222 Fischer Bldg.
Dubuque, IA 52004-0239

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

OR

1b□INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
Walters	Larry	A.	

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)
None		

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 Mail in enclosed envelope

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

FILING OFFICE COPY (1) — NATIONAL INFORMATION REQUEST (FORM UCC11) (REV□05/09/01)