			Document 2004 18	
			Book 2004 Page 1804 Date 4/23/2004 Tim Rec Amt \$11.00	Type 17 04 Pages e 1:46 PM
ORMATION REQUEST OW INSTRUCTIONS (front and back) CAREFL AME & PHONE OF CONTACT [optional]	JELY FILING OFFI	CE ACCT#	MICHELLE "MICKI" UTS MADISON IOWA	LER, COUNTY RECO
JoEllen Russell (ext. Action of the property o	19)		COMPUTI NECORD COMPAR	ED
DEBTOR NAME to be searched - insert only one	debtor лате (1a or 1b) - с	lo not abbreviate or comb	ine names	
N107FG INC.		FIRST NAME	MIDDLE NAME	SUFFIX
INFORMATION OPTIONS relating to UCC file				
	RTIFIED (Optional)	JNLAPSED	are lapsed or terminated after 7/1/01.	rmation (if required)
Record Number NO RECORDS FOUND	Date Record Filed	(if required) Type	of Record and Additional Identifying Info	rmation (ii required)
	i .			
ADDITIONAL SERVICES:				
. ADDITIONAL SERVICES: TO INCLUDE FIXTURE FILING	38			
ADDITIONAL SERVICES: TO INCLUDE FIXTURE FILING	GS .			
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TO INCLUDE FIXTURE FILING			unless otherwise instructed here):	
		address shown in item E	unless otherwise instructed here):	