

**STATE OF IDAHO - REQUEST FOR INFORMATION OR
COPIES - UCC-4**

Customer account number

Mail to: Secretary of State, UCC Division, 700 W Jefferson, PO Box 83720, Boise, ID 83720-0080, PH 208-334-3181

Instructions

1. Enter your Secretary of State customer number (if known) in the block at the top right. If the fee is to be charged to your pre-paid account, the customer number must be entered.
2. Enter the name of the Debtor (or Producer) exactly as you want it to be searched. Enter only one name.
3. In the Address block, you may enter either a complete address or a city name to limit the scope of the search. You may enter "Any address" if you want all filings against the Debtor name without regard to location.

Debtor (or Producer) on whom information is requested. (Enter only one name)

Name: GRAVATT, ERIC K.

SBN/TIN (if known):

Address:

2830 ROSS CIRCLE
IDAHO FALLS, IDAHO 83406

5. BOPH m01/4/11/2883004-9001(SBA)

Name and address of requesting party

ZIONS FIRST NATIONAL BANK
2460 SOUTH 3270 WEST
WEST VALLEY CITY, UT 84119

Contact Person: _____

Phone #: _____

Special Instructions: _____

INFORMATION REQUEST

COPY REQUEST

Filing officer: Please furnish a certificate showing any presently effective notices of the types indicated below relating to the above named Debtor or Producer. (Check box(es) for type(s) of notices to be reported on certificate. Check one or more. If no boxes are checked, it will be assumed you want all types.)

- UCC financing statements (other than farm products).
- Government Liens (IRS, indigent, employment, state tax, etc.)
- Effective financing statements (EFS) pertaining to farm products.
- Liens in crops, for seed or farm labor.

Filing officer: If this box is checked, please provide a copy of the documents reported on the certificate.

Filing officer: If this box is checked, please provide a copy of first page only of the documents reported on the certificate. (This option is not available for faxed reports)

Signature of Requesting Party _____

1. If only one notice type is checked in the information request, enter \$6.00. If more than one is checked, enter \$10.00.	10.00
2. If copies are requested, enter \$6.00.	6.00
3. If the request is not typed or is submitted without the standard form, enter \$4.00.	
4. If expedited service is requested, enter \$10.00. Also please complete 4A below	

Pay this amount (unless you are charging it to your pre-paid account) **Total.** 16.00

4A. If Expedited, please indicate how you want the search handled by checking the appropriate box.

- Mail to requesting party.
- Call when ready _____
- Courier company & account # _____
- Fax # _____ \$0.1 per page fax fee invoiced separately.

Filing Office Use Only

UCC/FORMS/UCI/PMS Released 8/08

IDAHO SECRETARY OF STATE

03/24/2008 09:00
CK: 138578346 CT: 127401 DN: 302222

1 @ 16.00 = 16.00 CONDO/COPY # 4

Filing Number: **Y 303833**