



Prescribed by **J. Kenneth Blackwell**

Please obtain fee amount and mailing instructions from the **Filing Reference Guide** ( using the 3 digit form # located at the bottom of this form). To obtain the Filing Reference Guide or for assistance, please call Customer Service:  
 Central Ohio: (614)-466-3910 Toll Free: 1-877-SOS-FILE (1-877-767-3453)

***SPECIFIC COPY REQUEST***

**INCLUDE A FILING FEE OF \$5.00 FOR EACH COPY REQUEST PAGE** (*Maximum of 5 requests per page*)

Name of Requesting Party	Date

Debtor(s) Name	Return Information
	Name:
	Address:
	ATTN:
	City:
	State & Zip:
	Phone:

Financial Statement Number	Roll/Frame	Misc. Number	Roll/Frame

***MAXIMUM OF FIVE REQUEST PER FORM***