

for individuals (sole proprietorships), firms or partnerships engaged in business under a name other than their own (DBA)

STATE OF INDIANA, COUNTY OF Lake

NAME OF BUSINESS: Physician's Claim Management

KIND OF BUSINESS: Medical Billing Service

PLACE OF BUSINESS: Home Based 629 S. Washington St. Hobart, In 46342

PRINTED NAMES AND RESIDENCES OF MEMBERS OF FIRM OR PARTNERSHIP

Tiffany Mummy AT 629 S. Washington St Hobart In 46342

NOT OFFICIAL!

This Document is the property of the Lake County Recorder!

AT

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AT

AT

98042546

I hereby certify that I have personal knowledge of the facts stated above and that each of them are true.

Tiffany R. Mummy Tiffany R. Mummy
WRITTEN SIGNATURE PRINTED NAME

Owner
CAPACITY OF SIGNER

93 JUN - 9 1998

STATE OF INDIANA
LAKE COUNTY
FILED RECORDS

THE COMPLETED FORM MUST BE FILED IN THE OFFICE OF THE COUNTY RECORDER OF EACH COUNTY IN WHICH A PLACE OF BUSINESS OR OFFICE IS LOCATED.

FILED ON June 8th, 19 98. Alvin W. Carter RECORDER

9.00
cm
cash