INFORMATION REQUEST FOLLOW INSTRUCTIONS (front and back) CAREFULLY ADNAME & PROME OF CONTACT (policional) Any 365-4032 or Karen 365-4864 2 0 0 5 0 0 9 0 8 8 2005 FED - 3 PH 3: 2  BORE LIWIN TO: (Name and Address)  The Paper Chase of Northwest Indiana, Inc. 9505 Genevieve Drive St. John, IN 46373  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  10DEBTOR NAME to be searched - insert only and debtor name (1s or 1b) - do not abbreviate or combine names  1scCRGANIZATION'S NAME Allard Rental Corporation  REST NAME FIRST NAME FIRST NAME SUFFIX  2ad SEARCH RESPONSE CERTIFIED (Optional) Select and of the following two options: ALL (Check this box to request a response that is complete, including filings that have lapsed)  2cd SPECIFIED COPIES ONLY  Date Record Filed (if required)  Type of Record and Additional Identifying Information (if required)  Record Number
FOLLOW INSTRUCTIONS (front and back) CAREFULLY  ADDAME & PHONE OF CONTACT (polyonal)  Any 365-4082 or Karen 365-4864  BORETURN TO: (Name and Address)  The Paper Chase of Northwest Indiana, Inc. 9505 Genevieve Drive St. John, IN 46373  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  10DEBTOR NAME to be searched - insert only and debtor name (1a or 1b) - do not abbreviate or combine names  TacORGANIZATION'S NAME  Allard Rental Concation  PRST NAME  AIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PROWN  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  2015 FOR FILING OFFICE USE ONLY  2015 FOR TABLE  AIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  2015 FOR 75 LUNK  PRST NAME  NIDOLE NAME  SUFFIX  SUFFIX  PRST NAME  NIDOLE NAME  SUFFIX  SUFFIX  SUFFIX  PRST NAME  NIDOLE NAME  SUFFIX  SUF
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Anny 365-4082 or Karen 365-4864    Description of the following two options:   Certified (Optional)
BORETURN TO: (Name and Address)  The Paper Chase of Northwest Indiana, Inc. 9505 Genevieve Drive St. John, IN 46373  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  10 DEBTOR NAME to be searched - insert only goal debtor name (1a or 1b) - do not abbreviate or combine names  TacDRGANIZATION'S NAME OR 1brinDiviDUAL'S LAST NAME  OR 1brinDiviDUAL'S LAST NAME  PRST NAME  PRST NAME  MIDULE NAME  SUFFIX  20 DECEMBER 1 Corporation  Select one of the following two options:  ALL (Check this box to request a response that is complete, including filings that have lapsed)  UNLAPSED  20 DECEMBER 2 CERTIFIED (Optional)  CERTIFIED (Optional)
The Paper Chase of Northwest Indiana, Inc. 9505 Genevleve Drive St. John, IN 46373  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1DEBTOR NAME to be searched - insert only goal debtor name (1s or 1b) - do not abbreviate or combine names  1acDRGANIZATION'S NAME Allard Cental Corporation  PRST NAME MIDDLE NAME SUFFIX  2cINFORMATION 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: 2adSEARCH RESPONSE CERTIFIED (Optional) Select goal of the following two options: ALL Check this box to request a response that is complete, including filings that have lapsed UNLAPSED  2cdSPECIFIED COPIES ONLY CERTIFIED (Optional)  Select goal of the following two options: ALL UNLAPSED
The Paper Chase of Northwest Indiana, Inc. 9505 Genevieve Drive St. John, IN 46373  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1DEBTOR NAME to be searched - insert only one debtor name (1a or 1b) - do not abbreviate or combine names  1acorganization's name Allard Cental Corporation  1brindividual's Last name First name First name Middle name identified in item 1: 2adsearch 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  2cdspecified copies only Certified (Optional)  Select one of the following two options: ALL UNLAPSED
Northwest Indiana, Inc. 9505 Genevleve Drive St. John, IN 46373  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1DEBTOR NAME to be searched - insert only goal debtor name (1a or 1b) - do not abbreviate or combine names  1actor Ganization's Name Alard Rental Corporation  1brindividual's Last name IFIRST NAME MIDDLE NAME Suffix  2dINFORMATION 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: 2ad SEARCH RESPONSE CERTIFIED (Optional) Select goal of the following two options: ALL Check this box to request a response that is complete, including filings that have lapsed() UNLAPSED  2cd SPECIFIED COPIES ONLY CERTIFIED (Optional)
St. John, IN 46373  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1DEBTOR NAME to be searched - insert only goal debtor name (1a or 1b) - do not abbreviate or combine names  1acORGANIZATION'S NAME  Alard Cental Corporation  PIRST NAME  IFIRST NAME  MIDOLE NAME  SUFFIX  2DISEARCH 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 tapsed.)  UNLAPSED  2DICOPY REQUEST CERTIFIED (Optional)  Select one of the following two options:  ALL UNLAPSED  2cil Specified Copies Only Certified (Optional)
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1DEBTOR NAME to be searched - insert only grad debtor name (1a or 1b) - do not abbreviate or combine names  1atorganization's name  Allard Rental Corporation  1brindividual's last name  First name  MIDDLE NAME  SUFFIX  -2DNFORMATION 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:  2ad 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  2bd COPY REQUEST   CERTIFIED (Optional)  Select one of the following two options: ALL UNLAPSED  2cd SPECIFIED COPIES ONLY   CERTIFIED (Optional)
1aCDRGANIZATION'S NAME  Alard Rental Corporation  IbINDIVIDUAL'S LAST NAME  Alard Rental Corporation  FIRST NAME  MIDOLE NAME  SUFFIX  2d NFORMATION 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:  2aDSEARCH 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 tapsed()  Select one of the following two options: ALL UNLAPSED  2cD SPECIFIED COPIES ONLY CERTIFIED (Optional)  CERTIFIED (Optional)
OR 1brindividual's Last name   Suffix    2□NFORMATION 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:  2□DSEARCH 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 tapsed.)   UNLAPSED  2□DSPECIFIED COPIES ONLY   CERTIFIED (Optional)  Select one of the following two options:   ALL   UNLAPSED
All and Rental Corporation    Individual's Last Name
1brindividual's Last Name
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 tapsed.) UNLAPSED  2b COPY REQUEST CERTIFIED (Optional) Select one of the following two options: ALL UNLAPSED  2c SPECIFIED COPIES ONLY CERTIFIED (Optional)
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 tapsed.) UNLAPSED  2b COPY REQUEST CERTIFIED (Optional) Select one of the following two options: ALL UNLAPSED  2c SPECIFIED COPIES ONLY CERTIFIED (Optional)
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Record Number  Date Record Filed (if required)  Type of Record and Additional Identifying Information (if required)
Mecord Number Date Necord Filed (il required)
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/ v fung
3UADDITIONAL SERVICES:
Thru date: 3/5/05
Thru date:
4DDELIVERY INSTRUCTIONS (request will be completed and mailed to the address shown in item B unless otherwise instructed here):
4a 🔯 Pick Up
4b Other