		STATE COURTS		
		FILED FOR RECORD		
INFORMATION REQUEST		2005 MAR 15 AM 10: 23		
FOLLOW INSTRUCTIONS (front and back) CAREBURY 5 1 1 2 4 ADNAME & PHONE OF CONTACT (optional) FILING OFFICE ACCT #		NOTE OF TO	MWCRI	
Amy 365-4082 or Karen 36 BORETURN TO: (Name and Address)	W.C.C.A.			
<u> </u>	-			•
The Paper Cl				
Northwest India 9505 Geneview	/e DrIve			
St. John, IN	46373	<u>.</u>		
1DDEBTOR NAME to be searched - insert only one	debtor name (1a or 1b) - do not abbrevial		S FOR FILING OFFICE USE	ONLY
1aCORGANIZATION'S NAME				
OR 15/INDIVIDUAL'S LAST NAME	FIRST NAME	. i 1	DOLE NAME	SUFFIX
2010 PORMATION OPTIONS relating to UCC 118		Ning office that include as a Debtor n	same the name Identified in it	em 1:
2e DSEARCH RESPONSE CERTIFIED (O Select one of the following two options:	-	response that is complete, including	filings that have lapsed()	JUNLAPSED
2b0COPY REQUEST CERTIFIED (O				
2cDSPECIFIED COPIES ONLY CERTIFIED (Optional)				
Record Number	Date Record Filed (if required)	Type of Record and Additional id	dentifying information (if re-	quired)
3LIADDITIONAL SERVICES:				· · · · · · · · · · · · · · · · · · ·
	· .	Thru date:	3-14-00	5
40DELIVERY INSTRUCTIONS (request will be completed)	sted and mailed to the address shown in	item B unless otherwise instructed here):		
4b [Other Specify desired method here (if available from	this office); provide delivery information (eth)	Odelivery service's name, addressee's account	# with delivery services and reservation	Prince E etc.