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FORMATION REQUEST		AKE COUNT ED FOR FECOR
LLOW INSTRUCTIONS (front and back) CAREFULLY	-11.	ED FOR FECORE
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The Paper Chase of Northwest Indiana, Inc.		
9505 Genevieve Drive		
St. John, IN 46373		
L	ABOVE SPACE IS FOR FIL	ING OFFICE USE ONLY
DEBTOR NAME to be searched - insert only one debtor name (1a or 1b) - do not abbreviate or combine names [1a:DRGANIZATION'S NAME		
16/INDIVIDUAL'S LAST NAME FLAMINI FIRST NAME JAME	MIDDLE NAME	SUFFIX
INFORMATION OPTIONS relating to UCC filings and other notices on file in the filing office that incl 2e DSEARCH RESPONSE CERTIFIED (Optional)	ude as a Debtor name the n	ame identified in item 1:
2e□SEARCH RESPONSE	mplete including filings that	have lapsed
25DCOPY REQUEST CERTIFIED (Optional)	inplace, including limings that	navo iapocop Onexi o
Select one of the following two options: X ALL UNLAPSED		
2cD SPECIFIED COPIES ONLY CERTIFIED (Optional)		
Record Number Date Record Filed (if required) Type of Record a	and Additional Identifying	Information (if required)
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ADDITIONAL SERVICES:		
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