				LAKE I	orgina Raecor
INFORMATION REQUEST				FILED FO	IR REDUIN
FOLLOW INSTRUCTIONS (front and back) CAREFULLY ADNAME & PHONE OF CONTACT [optional] FILING OFFICE ACCORD 5 0 0 1 0 1 1 1 1 1 1				2005 11.77 - 5	5 PK 1:5
Amy 365-4082 OR Karen 3 BORETURN TO: (Name and Address)	65.4864			MORAL	· HALANA
				letter.	
The Paper (Northwest Inc 9505 Genevi St. John, IN	diana, Inc. eve Drive				
1DDEBTOR NAME to be searched - insert only Ω	na debter name (1e es 1h)	de not abbreviate et en		CE IS FOR FILING OFFICE USE	DNLY
OR 16 INDIVIDUAL'S LAST NAME	matic -	FIRST NAME	ort Con	MIDDLE NAME	SUFFIX
2b0 COPY REQUEST CERTIFIED	(Optional) ALL (Check this b (Optional)				UNLAPSED
	ERTIFIED (Optional)				·
Record Number	Date Record File	ed (if required) Type	of Record and Addition	al Identifying Information (if req	uired)
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	•	-	Thru date	: 5/4/200	5
40DELIVERY INSTRUCTIONS (request will be con	npleted and mailed to the	address shown in item B	unless otherwise instructed he	ere):	
	from this office); provide deliv	ery information (et)[]deliver	y service's name, addressee's ac	count # with delivery service, addressee's	phone #, etc()
EII ING OFFICE CORY (4) NATIONAL INFO	DMATION REQUEST	/FORM HOOM !	VCDE(00/04)		