

**INFORMATION REQUEST**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

ADNAME & PHONE OF CONTACT (optional) <b>Amy 365-4092 or Karen 365-4864</b>	FILING OFFICE ACCT # <b>2007 000207</b>
BORETURN TO: (Name and Address)  <b>The Paper Chase of Northwest Indiana, Inc. 9505 Genevieve Drive St. John, IN 46373</b>	

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD  
2007 MAR 22 AM 7:58  
MICHAEL A. BROWN  
RECORDER

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1DDEBTOR NAME to be searched - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a ORGANIZATION'S NAME				
OR	1b INDIVIDUAL'S LAST NAME <b>LEWIS</b>	FIRST NAME <b>CALVIN</b>	MIDDLE NAME <b>H.</b>	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:

2a 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 lapsed)  UNLAPSED

2b DCOPY REQUEST  CERTIFIED (Optional)  
Select one of the following two options:  ALL  UNLAPSED

2c DSPECIFIED COPIES ONLY  CERTIFIED (Optional)

Record Number	Date Record Filed (if required)	Type of Record and Additional Identifying Information (if required)
		<i>nothing on file</i>

3DADDITIONAL SERVICES:

Thru date: 3-21-07

4DDELIVERY INSTRUCTIONS (request will be completed and mailed to the address shown in Item B unless otherwise instructed here):

4a  Pick Up  
4b  Other

*CK # 3148*

Specify desired method (as available from this office); provide delivery information (e.g. delivery service's name, addressee's account # with delivery service, addressee's phone #, etc.)

FILING OFFICE COPY (1) - NATIONAL INFORMATION REQUEST (FORM UCC-11) (REV. 1/5/00/01)