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| NFORMATION REQUEST OLLOW INSTRUCTIONS (front and back) CA | | | | LAKE CO | MUIA) JUNTY | |
| ADNAME & PHONE OF CONTACT (optional) | d n4.07 | LAKE COUNTY FILED FOR RECORD | | | | |
| Army 365-4082 OR Karen 365-4864 CUU / U BORETURN TO: (Name and Address) | | | 90407 | 20 07 JUN -6 | 2007 JUN - 6 AM 10: 12 | |
| | | | -√ | MICHAEL A | MICHAEL A. BROWN | |
| The Paper Chase of | | | 1 | RECORL | RECORDER | |
| Northwest In | diana, Inc. | | | | | |
| 9505 Genev St. John, II | | | | | | |
| | | | THE ABO | OVE SPACE IS FOR FILING OFFIC | E USE ONLY | |
| DEBTOR NAME to be searched - insert only | one debtor name (1s or 1b) | - do not abbreviat | | | - | |
| Hamm | ond Do | nuts | Inc | (MIDDLE NAME | SUFFIX | |
| TEL MOINIQUAL S DAS! MARKE | | PIKS I IOUNE | | MIDULE NAME | SUFFA | |
| INFORMATION OPTIONS relating to UC | Citings and other notice | s on file in the | iling office that include | as a Debtor name the name identif | fied in item 1: | |
| 20DSEARCH RESPONSE CERTIFIED | (Optional) | | • | | _ | |
| Select one of the following two options: 25DCOPY REQUEST CERTIFIED | | ox to request a | response that is compl | ete, including filings that have lapse | MO UNLAPSE | |
| Select one of the following two options: | ALL | UNLAPSED | | | | |
| Zed specified copies only | CERTIFIED (Optional) | | _ | | | |
| Record Number | Date Record File | d (Hrequired) | Type of Record and | Additional Identifying Information | on (if required) | |
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| | | | Thru a | date: 6/5 | 101 | |
| ODELIVERY INSTRUCTIONS (request will be o | analogad and mailed to pt - | address shows w | | | | |
| DDELIVERY INSTRUCTIONS (request will be a date) 400 Pick Up | ompleted and mailed to the | appress trown m | HEAT OF STREET CHIEF WISE I | manage. | | |
| 4bd Other | | | المحدد واستنامه والمستناد | ciresses's account if with delivery service, a | diresses's chane if, etcli | |
| Specify desired method being (Il availab | e from this office); provide deli- | | 4) OR STATIONE AND | TOTAL PARTY OF THE | | |