	•		
INFORMATION REQUEST FOLLOW INSTRUCTIONS (front and back) CAREFULLY			LAKE COUNTY FILED FOR RECORD
ADNAME & PHONE OF CONTACT (optional) Any 365-4082 OR Karen 365-4	FILING OFFICE ACCT #	7	FILED FOR RECORD
BORETURN TO: (Name and Address)	2007_	10 0420	2007 JUN 12 AM 10: 19
The Days of Chause of			MICHAEL A. SROWN
The Paper Chase of Northwest Indiana, Inc.			RECORDER
9505 Genevieve Drive St. John, IN 46373			
		THE ABOVE SPACE	CE IS FOR FILING OFFICE USE ONLY
10DEBTOR NAME to be searched - insert only one debtor name (1a or 1b) - do not abbreviate or combine names [1aCORGANIZATION'S NAME] [G & D MACHINES INC			
OR 15/INDIVIDUAL'S LAST NAME	FIRST NAME	NES INC	MIDOLE NAME SUFFIX
-2dNFORMATION OPTIONS relating to UCC filings	and other notices on file in the fi	ling office that include as a Debt	for name the name identified in item 1:
2aDSEARCHRESPONSE CERTIFIED (Optional) Select one of the following two options: ALL (Check this box to request a response that is complete, including fillings that have lapsed() UNLAPSED			
2b0 COPY REQUEST CERTIFIED (Optional)			
Select one of the following two options: ALL UNLAPSED 2c SPECIFIED COPIES ONLY CERTIFIED (Optional)			
Record Number Da	ate Record Filled (if required)	Type of Record and Addition	al Identifying Information (if required)
		01 11	
		Mothing	
3UADDITIONAL SERVICES:			
on Delivery of the second of t			
	•		
		,	•
	· .	Thru date	: 6-11 -07
40DELIVERY INSTRUCTIONS (request will be completed and mailed to the address shown in item B unless otherwise instructed here): 4a Pick Up 4b Other Other			
Specify desired method here (if available from this	s office); provide delivery information (eig)	delivery service's name, addressee's acc	count # with delivery service, addressee's phone #, etc@