1415			
FOLLOW INSTRUCTIONS.			
A. NAME & PHONE OF CONTACT AT FILER KAREN 219-680-0066	(optional) FILING OFFICE ACCT #		
B. E-MAIL CONTACT AT FILER (optional)			
C. RETURN TO: (Name and Address)		GINA PIMENTEL RECORDER STATE OF INDIANA LAKE COUNTY FILED FOR RECORD	2022-037125
THE PAPER CHASE OF NORTHWEST INDIANA INC			2022-007 120
			10:52 AM 2022 Oct 2
L	الـ	THE ABOVE SPACE IS EQ.	R FILING OFFICE USE ONLY.
. DEBTOR'S NAME to be searched: Provide or	nly one Debtor name (1a or 1b) (Use exact, full name; d		
1a ORGANIZATION'S NAME			777
DR 1b. INDIVIDUAL'S SURNAME	X		
THOMPSON	1		
INDIVIDUAL'S FIRST PERSONAL NAME ANTHONY	0.0		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL	L(S)		SUFFIX
M. 2. INFORMATION OPTIONS relating to U	CC Eliana and alternations on Ele in the Elia	a effice that include the Debter name	identified in item 1:
2. INFORMATION OPTIONS relating to US		g office that include the Deptor name	dentified in item 1.
	ALL (Check this box to request a resp	onse that is complete, including filings	that have lapsed.)
2b. COPY REQUEST CERTIFIE			
Select one of the following two options: 2c. SPECIFIED COPIES ONLY	ALL UNLAPSED	- 19	
20. OF EOFFIED OUT IED ONE!	OEITH IED (Optional)		
Record Number	Date Record Filed (if required) Ty	pe of Record and Additional Iden	tifying Information (if required)
		47×	
TAT'T ALT 'II		7	
		A	
		.07	
3. ADDITIONAL SERVICES:		()	
THROUGH DATE:		10101/00	/h
Noth	ing on file Of Of	12/31/20	0/-
NOTH	ing on file as of		7 0,
			Profes
		25.00	201 7170
			CL# 1119
 DELIVERY INSTRUCTIONS (Request will be a 	completed and mailed to the address shown in item Cur	viess otherwise instructed here.):	