

# NOT AN OFFICIAL DOCUMENT



## INFORMATION REQUEST

State Form 55241 (4-13)

FOLLOW INSTRUCTIONS.

A. NAME & PHONE OF CONTACT AT FILER (optional) <b>AMY 219-218-2614</b>	FILING OFFICE ACCT #
B. E-MAIL CONTACT AT FILER (optional)	
C. RETURN TO: (Name and Address)	
<div style="border: 1px solid black; padding: 5px;"> <p><b>The Paper Chase of Northwest Indiana, Inc.</b>  <b>9505 Genevieve Drive</b>  <b>Saint John, IN 46373</b></p> </div>	<p style="text-align: center;"><b>GINA PIMENTEL</b>  <b>RECORDER</b></p> <p style="text-align: right; font-size: 1.2em;"><b>2024-007245</b></p> <p style="text-align: center;"><b>STATE OF INDIANA</b>  <b>LAKE COUNTY</b>  <b>RECORDED AS PRESENTED</b></p> <p style="text-align: right;"><b>2:57 PM    2024 Feb 28</b></p>
<b>THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY.</b>	

1. DEBTOR'S NAME to be searched: Provide only one Debtor name (1a or 1b) (Use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name.)

1a.	ORGANIZATION'S NAME <b>STRACK &amp; VAN TIL FOOD MARKET</b>
OR	1b. INDIVIDUAL'S SURNAME
	INDIVIDUAL'S FIRST PERSONAL NAME
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)
	SUFFIX

2. INFORMATION OPTIONS relating to UCC filings and other notices on file in the filing office that include the Debtor name identified in item 1:

2a. SEARCH 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. COPY REQUEST  CERTIFIED (Optional)  
 Select one of the following two options:  ALL  UNLAPSED

2c. SPECIFIED COPIES ONLY  CERTIFIED (Optional)

Record Number	Date Record Filed (if required)	Type of Record and Additional Identifying Information (if required)

3. ADDITIONAL SERVICES:

thru:

*Nothing on file As of 12/31/20.*

CHECK# **7549**

4. DELIVERY INSTRUCTIONS (Request will be completed and mailed to the address shown in item C unless otherwise instructed here.)

4a.  Pick Up  
 4b.  Other

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