

971

2-1 990

710

652413097

THOMAS C. LOLAKOS  
ELLEN L. ZETHMAYR  
1415 E CENTRAL RD., UNIT 321C  
ARLINGTON HEIGHTS, IL 60005

DATE \_\_\_\_\_

\$ \_\_\_\_\_

PAY TO THE  
ORDER OF

**BANK ONE.**

JPMorgan Chase Bank, N.A.  
Chicago, Illinois 60670

MEMO

10710000131

VO ID

DOLLARS



Security Features  
Included.  
Details on Back.

MP

65241309710971

*as of Sept 1, 2007*



## DIRECT DEBIT PROGRAM



Property Specialists, Inc. announces the Direct Debit Program for our clients. This program utilizes electronic funds transfer (EFT) to provide you with a timely, accurate, and convenient method to pay for association fees.

With Automatic Payment, you can eliminate the hassle of mail delays and late payments.

Direct Debit offers you:

- ✓ Assurance of Timely Payments
- ✓ Convenient Payment Method
- ✓ Simple and Easy Sign-Up

Clients choosing the Direct Debit Program ensure their payment has been received.

The Direct Debit plan gives you the reliability and safety advantages of knowing your payments are being made even if you are out of town.

PLEASE FILL IN THE FOLLOWING INFORMATION REGARDING YOUR BANKING INFORMATION AND RETURN TO US AT PSI AT 5999 SOUTH NEW WILKE RD. SUITE 108, ROLLING MEADOWS, IL 60008. YOU MUST SUBMIT AN UNSIGNED VOIDED CHECK WITH THIS FORM FOR VERIFICATION FOR US TO SET UP THE DIRECT DEBIT FROM YOUR ACCOUNT. PLEASE READ THE FOLLOWING AND SIGN BELOW. \* Checks sent to the PO Box will be destroyed and not processed. \*

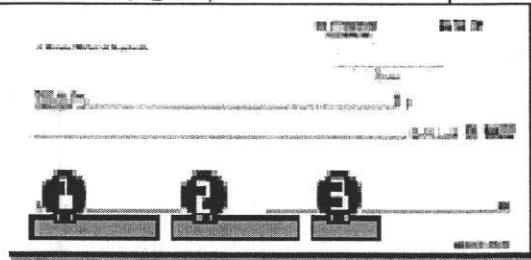
I (We) authorize Property Specialist, Inc. hereafter called "Company", to initiate debit entries to my (our) checking account indicated below and the institution named below, hereinafter called "Institution", to debit the same such account.

I (We) further authorize "Company" to initiate credits to my (our) account to correct errors, and "Institution" to initiate any such corrections to my (our) account. This authority is to remain in full force and effect until "Company" and "Institution" has received written notification from me (or either of us) of its termination in such time and in such manner as to afford "Company" and "Institution" a reasonable opportunity to act on it prior to depositing to the account.

HOMEOWNER (S) SIGNATURE Ellen Zethmoyr - Lolakos Trustee Lolakos Trust  
DATE July 30, 2007

PLEASE PRINT INFORMATION BELOW:

NAME: <u>Ellen Zethmoyr - Lolakos</u>	BANK NAME: <u>Chase</u>
ADDRESS: <u>1415 E Central Rd. Apt. 321C Arlington Heights, IL 60005</u>	BANK ADDRESS: <u>Arlington Heights La Grange, IL</u>
	BANK PHONE#
	BANK ACCOUNT # <u>000 000 652418097</u>
HOMEOWNER ACCOUNT# (SEE ASSESSMENT COUPON) <u>34-101-03-0321C- 01</u>	BANK ROUTING# (SEE EXAMPLE BELOW IF UNSURE) <u>071000013</u>



- 1** 00006 78941  
 Routing/Transit Number  
**2** 1234567811  
 Account Number  
**3** 1001  
 Check Number

Mail Completed Form and Voided Check to:

Property Specialists, Inc  
5999 S New Wilke Rd

Suite 108

Rolling Meadows, IL 60008-4501

*already in system*  
SEP 2007  
MAILED  
AUG 08 2007