

MIKHAIL KON 03/95
P.O. BOX 50
MT PROSPECT, IL 60056-0050

2-1/710
465020164211

686

Date _____

Pay to the
order of _____

VOID

\$

_____ Dollars

 Security features
included.
Details on back.

BANK ONE®

Bank One, NA
Chicago, Illinois 60670

For _____

⑆071000013⑆ 465020164211⑈00686

MP

POSTED

MAILED

JAN 13 2005

Direct Debit Program

Property
Specialists, Inc.
5999 New Wilke
Road, Suite
108, Rolling
Meadows, IL
60008

Property Specialists, Inc. announces the Direct Debit Program for our clients.

This program utilizes electronic funds transfer to provide you with a timely, accurate, and convenient method to pay for association fees.

With Automated 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

Start Feb 05

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

☒ Your payments are made directly from your account, eliminating time-consuming mail delays

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

Instructions: Complete the form below and attach an unsigned and voided check from this account to assist in verifying data.

I (we) authorize Property Specialists, 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 any 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.

Member Signature *Mikhail Kon*

Institution Account Number B.

Member Name Mikhail Kon

Institution Name Bank one.

Address 1415 E. Central Rd, # 316B

Institution Address _____

City, State, Zip Arlington Hts, IL 60005

Institution Phone Number _____

Account Number 34-101-01-0210B-2

Institution Transit ABA 71000013

it