

LEROY F. MAZUREK  
CHARLOTTE P. MAZUREK

$\frac{2-1}{710}$  5468

4099

PH. 847-956-1515  
1515 E CENTRAL RD., APT. 122-C  
ARLINGTON HEIGHTS, IL 60005

Date \_\_\_\_\_

Pay to the  
order of \_\_\_\_\_

VOID

\$

Dollars



Security Features  
Included.  
Details on Back.

**BANK ONE.**

Bank One, NA  
Chicago, Illinois 60670  
[www.bankone.com](http://www.bankone.com)

For \_\_\_\_\_

⑆071000013⑆

014883306⑈04099

MP

POSTED

JAN 20 2004

MAILED

JAN 21 2004

## Direct Debit Program

847-806-6121

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 04*

☒ 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 Leroy F. Mazurek

The Mazurek Family Trust  
Institution Account Number 148833-06

Member Name LEROY F. MAZUREK

Institution Name Bank One

Address 1515 E. Central Apt 122-C

Institution Address Arlington Hts IL

City, State, Zip Arlington Hts IL 60005

Institution Phone Number \_\_\_\_\_

*Dana Polin* Account Number 101020122C 1

Institution Transit ABA \_\_\_\_\_