

**ROBERT P. SCOTT** 06-82  
**CHARLENE A. SCOTT**  
1615 E. CENTRAL RD., APT. 318C  
ARLINGTON HEIGHTS, IL 60005

**2-1990**  
710  
2480008870054

**7726**

DATE \_\_\_\_\_

PAY TO THE  
ORDER OF \_\_\_\_\_

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

DOLLARS

Security Features  
Included.  
Details on Back.

**BANKONE®**

Bank One, NA  
Chicago, Illinois 60670  
www.BankOne.com

MEMO \_\_\_\_\_

**MR**

1:071000013:2480008870054!! 7726

MAILED  
APR 13 2004  
**POSTED**  
APR 13 2004

## 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
- 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 Thaddeus O. Scott

Member Name Robert & Charlene Scott

Address 1615 E. CENTRAL Rd. #318C

City, State, Zip Arlington Hts, IL 60005

Bank Account Number 101050318C 1

Institution Account Number 248 0008870054

Institution Name Bank One

Institution Address Chicago, IL 60670

Institution Phone Number ?

Institution Transit ABA