



STOP PAYMENT

PAYABLE TO		CHECK NO.	DATE OF CHECK	DATE	AMOUNT OF CHECK
REASON FOR STOP PAYMENT		TIME ACCEPTED	DATE STOPPED		\$
					REMARK

The undersigned agrees to reimburse you all damages, cost and expense to which you may be subjected, by reason of refusal to honor said check, it is hereby understood that you are to use every reasonable effort to stop said check, but should the same be paid after due diligence upon your part, you are not to be held liable in any way, and said check shall be charged against the account indicated below. This order will automatically expire six months from date, unless previously released or renewed in writing. Closing of the account upon which his check is drawn, or transfer of same to another branch by the undersigned, shall automatically cancel this order.

SIGNATURE OF DEPOSITOR X	
TELEPHONE NO.	ORDER ACCEPTED BY

FEE RECEIVED	
<input type="checkbox"/> CASH	Amount
<input type="checkbox"/> CHARGE	
<input type="checkbox"/> WAIVED \$	
ACCOUNT NUMBER	

DRAWN BY (MAKER NAME)
-----------------------

BANK FILE COPY

TO: HANMI BANK

THIS STOP PAYMENT IS HEREBY REVOKED:

I understand that this revocation is not effective until notice thereof is received by the banking office where I maintain my account, in sufficient time for the bank to take necessary action.

OFFICE
DATE

X
SIGNATURE OF DEPOSITOR
NAME



STOP PAYMENT

PAYABLE TO		CHECK NO.	DATE OF CHECK	DATE	AMOUNT OF CHECK
REASON FOR STOP PAYMENT		TIME ACCEPTED	DATE STOPPED		\$
					REMARK

The undersigned agrees to reimburse you all damages, cost and expense to which you may be subjected, by reason of refusal to honor said check, it is hereby understood that you are to use every reasonable effort to stop said check, but should the same be paid after due diligence upon your part, you are not to be held liable in any way, and said check shall be charged against the account indicated below. This order will automatically expire six months from date, unless previously released or renewed in writing. Closing of the account upon which his check is drawn, or transfer of same to another branch by the undersigned, shall automatically cancel this order.

SIGNATURE OF DEPOSITOR X	
TELEPHONE NO.	ORDER ACCEPTED BY

FEE RECEIVED	
<input type="checkbox"/> CASH	Amount
<input type="checkbox"/> CHARGE	
<input type="checkbox"/> WAIVED \$	
ACCOUNT NUMBER	

DRAWN BY (MAKER NAME)
-----------------------

CUSTOMER COPY