SOUTH CENTRAL BANK

A BANK THAT'S ALL YOUR OWN

Dear Customer,

Please complete the following information and fax this form to the bookkeeping department at **(312) 492-6918**. If you have any questions, please call a personal banker at (312) 491-7100.

Name _____.

Address _____.

City, State Zip_____.

Account Number _____.

Check # _____.

Amount _____.

Date of Check _____.

Payable To _____.

STOP PAYMENT ORDER

The above information regarding my Stop Payment Order is correct.

I agree to hold South Central Bank harmless for all expenses and costs incurred by the Bank on account of refusing payment of the above described check. I agree not to hold the bank liable on account of payment contrary to this request if same occurs through inadvertence, accident, or oversight. I understand this order will automatically expire in 6 months unless renewed in writing. There is a stop payment fee of $12.00 per item that will be charged to your account.

Signed,

_____.

Authorized Signer