

Address of Bank City, State and Zip Code

Date

Full Name and Address

Dear Valued Customer,

We received......

| ACCOUNT # | AMOUNT DEBITED | NON-REFUNDABLE PROCESSING FEE | BOX# |
|---|----------------|-------------------------------|------|
| *************************************** | | \$ | |
| ********* 0000 \$ \$ | | | |

Please be aware that.....

If you have any questions about the legal order, believe it should not apply to your account(s), or think the order

contains an error, please contact the......

Should you have questions concerning your account, please contact our Customer Service Center at one of the numbers listed below. Should you need to forward any additional correspondence to us regarding this matter, please direct it to the address noted above.....

Legal Order Processing 0-000-000-0000

| Telephone Banking: | Spanish Telephone Banking: | For Speech or Hearing Impaired TDD Required: |
|-----------------------|----------------------------------|--|
| 0.000.000.0000 | 0.000.000.0000 | 0.000.000.0000 |