20 South Clark Street, Suite 2900, Chicago, IL 60603 312-641-7799 Phone 312-205-0363 Fax

	312-041-7733 1 HOHE	312-203-0303 Fax
ESCROW NUMBER: _		
	STRICT JOINT O	RDER ESCROW

Property Address:

respective legal representatives or assigns.

Deposits:	
Certified, und	certified, cashier check(s) or wire(s) in the amount of \$
or other	is hereby deposited with Old Republic National Title Insurance Company as
ESCROWE	to be delivered by it only upon the joint written order of the undersigned or their

Old Republic National Title Insurance Company, as ESCROWEE, is hereby expressly authorized to disregard, in its sole discretion, any and all unilateral notices or warnings given by any of the parties hereto, or by any other person or corporation, but said ESCROWEE is hereby expressly authorized to regard and to comply with and obey any and all orders, judgments or decrees entered or issued by any court with or without jurisdiction, and in case the said ESCROWEE obeys or complies with any such order, judgment or decree of any court it shall not be liable to any of the parties hereto or any other person, firm or corporation by reason of such compliance, notwithstanding any such order, judgment or decree being entered without jurisdiction or being subsequently reversed, modified, annulled, set aside or vacated.

In case of any suit or proceeding regarding this escrow, to which said ESCROWEE is or may at any time become a party, it shall have a lien on the contents hereof for any and all costs, attorneys' and solicitors' fees, whether such attorneys or solicitors shall be regularly retained or specially employed, and any other expenses which it may have incurred or become liable for on account thereof, and it shall be entitled to reimburse itself therefore out of said deposit, and the undersigned jointly and severally agree to pay said ESCROWEE upon demand all such costs, fees and expenses so incurred.

In no case shall the above-mentioned deposits be surrendered except on an order signed by the parties hereto, their respective legal representatives or assigns, or in obedience of the process or order to court as aforesaid.

Deposits made pursuant to these instructions may be invested on behalf of any party or parties thereto: Provided, that any direction to ESCROWEE for such investment shall be expressed in writing and contain the consent of all other parties to these escrow and also provided that you are in receipt of the tax payer's identification number and investment forms as required. ESCROWEE will, upon request furnish information concerning its procedures and fee schedules for investment.

Billing Instructions: Escrow fee will be billed as follows: 50% to Seller and 50% to Purchaser. An annual maintenance fee will be billed commencing: Except as to deposits of funds for which ESCROWEE has received express written direction concerning investment to other handling, the parties hereto agree that the ESCROWEE shall be under no duty to invest or reinvest any deposits at any time held by it thereunder: and, further that ESCROWEE may commingle such deposits with other deposits or with its own funds in the manner provided for the administration of funds under Section 2-8 of the Corporate Fiduciary Act (ILL. Rev. State 1992 205ILES 620/2-8) and may use any part or all such funds for its own benefit without obligation to any party for interest or earning derived thereby, if any. Provided, however, nothing herein shall diminish Escrowee's obligation to apply the full amount of the deposits in accordance with the terms of the Agreement. In the event the ESCROWEE is requested to invest deposits hereunder, Old Republic National Title Insurance Company is not to be held responsible for any loss of principal or interest which may be incurred as a result of making the investments or redeeming said investment for the purposes of these escrow instructions. **PURCHASER**: Signed By: Address: Phone: Fax: **SELLER:** Signed By: Address: Phone: Fax:

ACCEPTED:

Old Republic National Title Insurance Company

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2) •	_

OLD REPUBLIC NATIONAL TITLE INSURANCE COMPANY

20 South Clark Street, Suite 2900, Chicago, IL 60603 312-641-7799 Phone 312-205-0363 Fax

INVESTMENT INSTRUCTIONS NOTE: IF YOU REQUEST FUNDS TO BE INVESTED THE CHECK MUST BE CERTIFIED OR THE FUNDS WIRED INTO OUR ACCOUNT

ESCR	OW NUMBER:	DATE:
To: Old	d Republic National Title Insura	nce Company, as Escrow Trustee:
In connection with the above referenced escrow, and upon receipt of all appropriate and required investment forms and a check payable to Old Republic National Title Insurance Company in the amoun of \$200.00 for account set-up fees, you are hereby authorized and directed to invest the sum of \$ with JPMorgan Chase. N.A. in the investment option specified below:		
	FUNDS ARE NOT TO BE IT	NVESTED AT THIS TIME
	MONEY MARKET	
	CERTIFICATE OF DEPOS	IT (MATURITY DATE:)
accoun applica funds, (JP Mor Title In transfer	t for me/the company under the able. While it is recognized that Old Republic National Title Insurgan Chase, N.A. will allow deposurance Company) order. No cors will be made charging and creating the company of the core will be made charging and creating the company.	nal Title Insurance Company to establish an interest bearing standard terms and conditions of a money market account, if the undersigned individual/company has a beneficial interest in the transce Company of Illinois is the authorized signer on the account. To be sits and withdrawal transfers only on its (Old Republic National checks will be drawn on this account. Deposits and withdrawal editing respectively Old Republic National Title Insurance for the area referenced above.
and/or the inci	principal if liquidated prior to th	Deposit and U. S. Treasury Bills will be subject to loss of interest the specified maturity date. It is further acknowledged that due to test of Deposits and U. S. Treasury Bills, there may be funds a will not be invested.
		instructions must be received in writing on this form or supplement y date of the existing investment in order to prevent any interest
Writter	n direction of will be requ	ired to reinvest funds upon maturity.
sales; a Nationa investn	any partial withdrawals; and roll al Title Insurance Company to d ment fees and/or the remaining b	s an investment fee assessed for the initial investment; any partial overs. The undersigned hereby authorize and direct Old Republic educt its investment fee(s) from any interest earned. The alance due for the investment fees after Old Republic National ny interest earned to said fees will be paid by

STANDARD PROVISIONS

It is understood and agreed that funds so invested are to be held by the escrow trustee subject to the terms and conditions of the above referenced escrow instructions to same extent, in like manner, and with the same force and effect as when said funds were originally deposited.

It is further understood and agreed that neither the escrow trustee nor the Company shall be required to ensure the collection of either principal or interest of any securities purchased or money markets opened; to give notice for payment; make any presentment or demand for payment thereof; and neither the escrow trustee nor the Company shall be liable to any person for any loss occasioned by failure to do so; but the escrow trustee may nevertheless, at its option, take such action as it may deem advisable for its own protection.

It is further understood and agreed that the escrow trustee shall not be liable to the undersigned indemnitors, their heirs, personal representatives or assigns or to any other persons whomsoever for any loss, damage or injury that may be sustained by them or any of them by reason of any other investment of reinvestment purchased, made, sold, exchanged, held or otherwise disposed of by the escrow trustee pursuant to the above instructions, or upon direction, any and all such liability being expressly waived.

It is understood by the signatories that Old Republic National Title Insurance Company is not responsible for any loss of principal or interest which may in incurred as a result of making this investment or redeeming this investment pursuant to directions provided by the parties to this escrow trust.

It is further understood by the signatories that upon the maturity of this investment Old Republic National Title Insurance Company shall be under no obligation to notify that parties or reinvest any sums without receiving a subsequent written direction from the appropriate party.

REQUIRED TAX INFORMATION

By:	By:	
(For Seller)	(For Buyer)	
APPROVED:		
Print Name:		
Signature:		
SSN or tax I.D #:		
Phone No:		
City/State/Zip:		
Address:		
Company/Individual Name:		

ACCEPTED: Old Republic National Title Insurance Company, as Escrow Trustee ESCROW NUMBER:
By:
NOTE: THE FOLLOWING MUST BE COMPLETED; NO INTEREST BEARING ACCOUNT
WILL BE OPENED IF THIS INFORMATION IS NOT PROVIDED:
At the end of the calendar year the bank will be sending out 1099-INT forms for Income Tax purposes, these forms should be mailed to:
NAME
STREET ADDRESS
CITY STATE AND ZID CODE
CITY, STATE AND ZIP CODE
PHONE NUMBER
BIRTH DATE IF INDIVIDUALS

WE WILL ALSO NEED A W9 SUBMITTED. IF YOU NEED ONE, PLEASE CALL USat 312.641.7799. WE WILL BE HAPPY TO PROVIDE ONE TO YOU.