

SIGNATURE

Primary Signature:

Date:

Joint Signature:

Date:

IMPORTANT INFORMATION

A copy of your driver's license with the new address must be included with this form. Once complete and signed, please mail, email, or fax to:

Mail: Desert Community Bank | Mail Stop 4-323 | 301 W. Michigan Avenue | Jackson, MI 49201 **Email:** inbound@dcbk.org **Fax:** (248) 250-5551

* By providing your email address to us, you expressly consent to receive emails from us. We may use email to communicate with you, to send information that you have requested or to send information about other products or service developed or provided by us. We will not give your email address to another party to promote their products or services directly to you.

