THE COMMERCE BANK

Servicemembers Civil Relief Act Reimbursement Consent Form

To: The Commerce Bank of Washington SCRA SERVICING UNIT Mail Code UT-ZTC-1850 7860 South Bingham Junction Blvd.

Midvale, UT 84047

For Loans

I request reimbursement of any interest above 6%, or fees that the Bank determines are reimbursable, on my accounts as permitted under the Servicemembers Civil Relief Act. I elect for any amounts to be reimbursed to my accounts as indicated below:

For Deposit Accounts or Safe Deposit Boxes

Ο	Principal Reduction	Ο	Credit to Deposit Account
Ο	Apply Towards Monthly Payment	Ο	Issue Check and Mail to Me
Ο	Issue Check and Mail to Me		
applicable manner ir are not at deposit a	imbursement amounts may include any interest above 6% or fees e, to your loan(s) or deposit account(s). For loan accounts, if you so indicated above (i.e. account is closed or restricted), we will mail you le to credit your specified deposit account, we will mail you a checocount, we will credit that account. The ent a check is mailed to you, please indicate the address to send it	elect a reir ou a check. ck; howeve	nbursement option that cannot be applied in the For deposit accounts, if this form is not received or we
Mailing Address:		Phone Number:	
City, State, Zip:		Email Address:	
purposes	e customer information above will not be used to update your bank associated with the Servicemembers Civil Relief Act. Once we de ement under SCRA, we will notify you.		
Date		Date	
Printed N	ame	Printed N	lame
Signature		Signature	

Note: Please return the Servicemembers Civil Relief Act Request for Relief Form, the Servicemembers Civil Relief Act Reimbursement Consent Form, and a copy of (i) your active duty military orders, with any amendments or (ii) any other appropriate indicator of military service, including a certified letter from a commanding officer, to one of the following addresses:

SCRA Servicing Unit Mail Code UT-ZTC-1850 7860 South Bingham Junction Blvd. Midvale, UT 84047 SCRAunit@zionsbancorp.com

