



CATTELEMENS BANK

REQUEST TO CHANGE CONTACT INFORMATION

I request that Cattlemens Bank update my account(s) listed below with the following contact information. I understand that I may be requested to provide additional information as proof of the change(s).

For a name change, Cattlemens Bank will require proof of identity (copy of a valid driver's license or state-issued ID AND social security card) and documentation of the legal name change (copy of a marriage certificate, divorce decree, court order or other government-issued certification).

This form may only be used to update the contact information for existing account Owners; it may not be used to add or remove signers.

Please note: The individual signing this form must be an Owner on each of the accounts listed.

PART 1: Account Information - <i>Required</i>											
Account Number:											Account Title:
Account Number:											Account Title:
Account Number:											Account Title:
Account Owner First Name:								MI:	Last Name:		

PART 2: NEW Address (to be ADDED to account(s))			
Mailing Address:			Apt. #:
City:	State:	Zip:	
Street Address: <small>(required if mailing address is to a P.O. Box)</small>			Apt. #:
City:	State:	Zip:	

<i>Please remove the following address from my account(s)</i>			
Mailing Address:			Apt. #:
City:	State:	Zip:	
Street Address: <small>(required if mailing address is to a P.O. Box)</small>			Apt. #:
City:	State:	Zip:	

PART 3: Name Change Information (Please see top of this page for additional requirements regarding a name change)		
Old Name - First:	MI:	Last Name:
New Name - First:	MI:	Last Name:

PART 4: Checks and Debit/ATM Card – Reorder	
<input type="checkbox"/>	Please order new checks reflecting my new contact information, in the same style as my last check order. I understand that the affected account(s) will be charged accordingly.
<input type="checkbox"/>	<i>For name change only:</i> Please order a new debit/ATM card reflecting my new name. I understand that the affected account(s) will be charged accordingly.

PART 5: Contact Information		
Account Owner 1 Name:		
Home Phone:	Work Phone:	Mobile Phone:
Email:		
<i>Please REMOVE the Following Information:</i>		
Home Phone:	Work Phone:	Mobile Phone:
Email:		
Account Owner 2 Name:		
Home Phone:	Work Phone:	Mobile Phone:
Email:		
<i>Please REMOVE the Following Information:</i>		
Home Phone:	Work Phone:	Mobile Phone:
Email:		

PART 6: Signature – Required		<i>The individual signing below must be an Owner on each of the accounts listed in Part 1.</i>
Signature of Account Owner Listed in Section 1:		
Printed Name of Acct Owner Listed in Section 1:	Date: (mm/dd/yyyy)	

FOR BANK USE ONLY		
Date Received:	Date Completed:	CSR Initials:

OKLAHOMA LOCATIONS

<p>ALTUS PO BOX 8086 ALTUS, OK 73522 P: 580.477.2222 F: 580.477.4777</p>	<p>GOULD PO BOX 190 GOULD, OK 73544 P: 580.676.3921 F: 580.676.3951</p>	<p>HOLLIS PO BOX 146 HOLLIS, OK 73550 P: 580.688.2290 F: 580.388.2292</p>	<p>MANGUM PO BOX 580 MANGUM, OK 73554 P: 580.782.2222 F: 580.782.2224</p>	<p>ELDORADO PO BOX 306 ELDORADO, OK 73537 P: 580.633.2493 F: 580.633.2774</p>
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TEXAS LOCATIONS

<p align="center">DALLAS 16400 DALLAS PKWY, STE 350 DALLAS, TX 75248 P: 972.386.9950 F: 972.386.7325</p>	<p align="center">FORT WORTH 5119 MARATHON AVE FORT WORTH, TX 76109 P: 817-289-4500</p>
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Allow three to five business days from the day the bank receives this form for the change(s) to become effective.

Please **mail or fax** this completed form, **with signature**, to any of the above addresses or fax numbers: Attn: Account Maintenance.
If the form is not signed by an account **owner** the request will not be processed.