

As of _____, I request my account
(date)

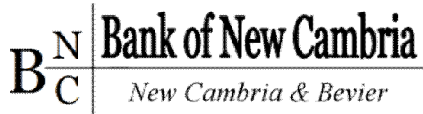
_____ be changed to a:

- Now Account
- VIP Account I am 55 years old. Birthdate _____
- Money Market Deposit Account (MMDA)
- Super Checking, _____ Super Plus Checking
- Regular Checking
- Free Checking

Signature _____

If using a windowed envelope,
make sure this address shows to
send to the
NEW CAMBRIA office.

BANK OF NEW CAMBRIA
200 SOUTH MAIN
NEW CAMBRIA, MO 63558



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to send to the
BEVIER branch.

BANK OF NEW CAMBRIA
1300 STATE HIGHWAY C
BEVIER, MO 63532