

Change of Address Form

If your address changes, please complete, sign and return this form to the following:

Via Mail to: The BUCF Receivership
Thompson & Knight LLP
Jennifer R. Ecklund
One Arts Plaza
1722 Routh St, Suite 1500
Dallas, TX 75201

Via Email to: BUCFReceivership@tklaw.com

Claimant's (Investor's) Name (Last Name, First Name, M.I. / Entity Name):

For verification purposes, the last 4 digits of your social security number: _____

OLD Mailing Address: _____

NEW Mailing Address: _____

Phone Number: _____

Email Address: _____

Claimant's (Investor's) Signature _____ Date _____