## CKS Wireless

## **Account Name Change Request**

NOTE: This form must be printed, signed and faxed/delivered to the address at the bottom

Current Accour	nt Name					
Service Address						
Mailing Address (if different)						
Proposed Name						
Reason for change:						
					CIRCLE ON	JF I
le name change due to diverse marriage or decorded graves?						NO
Is name change due to divorce, marriage or deceased spouse?  If YES please complete the "NEW OCCUPANT INFORMATION" below and sign yo					_	
signature line at the bottom of this form						
					CIRCLE ONE	
Is name change due to co-owners (property owner) or roommates?						NO
If YES please complete the "NEW OCCUPANT INFORMATION" below and sign your name at the						
signature line at the bottom of this form						
bigiliated to the bottom of this form						
NEW OCCUPANT INFORMATION						
Home Telephone Number						
Work Telephone Number						
Driver's License						
All name changes will be completed when paperwork is returned to CKS Wireless						
Signature Date				Date		
After completing and signing this form you mail, fax, or email it to us.						
MAIL			FAX	EMAIL		
CKS Wireless PO Box 2125			903-541-0889	monica@ckswireless.com		
Jacksonville, TX 75766						