

DIRECTOR OF ADMINISTRATION CRAIG D. COMBS

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OKLAHOMA BAR ASSOCIATION

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OBA Address and /or Name Change Form

Name change requests MUST be accompanied by a marriage certificate, divorce decree or other court document.

Current Official Roster Address/Name is:

FULL NAME			BAR NUMBE
STREET ADDRESS / PO BOX	(
CITY		STATE	ZIP CODE
lease make the following	g changes a	at my reques	st:
NAME CHANGES (MUST provi	ide copy of mar	riage certificate/	/decree/court order)
OFFICE STREET ADDRESS /	РО ВОХ		
CITY	STATE	ZIP CODE	COUNTY
Area PHONE NUMBER		(<u>) </u>	FACSIMILE NUMBER
MAIL ADDRESS			
SIGNATURE			DATE

Please note: All Roster information, except e-mail address is **PUBLIC**. Thank you!