

## **Change of Address Form - Instructions for Submittal to CHK**

- 1. First, you must **download** and **save** the form to your computer.
- 2. **Open** the saved form from where you saved it on your computer.
- 3. **Type** in your information, completing all fields.
- 4. Check the box under TERMS OF ACCEPTANCE & SIGNATURE and type in your complete name. (By checking this box and typing your name, you are electronically signing the Change of Address form and confirming that you understand that an electronic signature has the same legal effect and can be enforced in the same way as a written signature.)
- 5. Click Save on the form.
- 6. **Email** the completed Change of Address form to <a href="mailto:contact@expandenergy.com">contact@expandenergy.com</a>.

Note: If you prefer to submit the Change of Address form by postal mail, follow instructions 1-4 above, then **print** the completed form and **mail** to:

Expand Energy
Attn: Owner Relations
P.O. Box 18496
Oklahoma City, OK 73154-0496



## **ELECTRONIC CHANGE OF ADDRESS FORM**

l,	(print nam	ne), authorize Expand Energ	y Corporation and/or its	
affiliates/subsidiaries to change			,	
Owner Number:	OR Lease Number:			
Last 4 Digits of Social Security	/#/Taxpayer ID:			
(Your Owner Number is listed under th	e name and address s	ection of your revenue check stub)		
Name on the Account:				
Your Name (if you are not the o (If not previously provided, please at review.)	wner):tach documentation e	establishing your relationship with th	ne Account Owner for Expand	
OLD ADDRESS		NEW ADDRESS		
Address		Address		
City/Locality/Village		City/Locality/Village	City/Locality/Village	
State/Province/Region		State/Province/Region	State/Province/Region	
Zip		Zip		
Country		Country		
		Phone		
		Email		
Apply this address change to m	y: Check/Rev	venue Address Correspo	ndence Address	
If neithe	r box is selected, k	ooth addresses will be update	d.	
All fields must be complete or the cl			receipt and approval, the	
change of address will become eff	ective within thirty (3	30) days.		
TERMS OF ACCEPTANCE & SIGNA I, the requestor for this Change of Ac		the truthfulness of the information ເ	provided in this submission. I	
understand that an electronic signatur				
Step 1: Check the box below				
*By checking this box and	l typing my name be	low, I am electronically signing thi	s Change of Address Form	
Step 2: Type in your name in the be	oxes below. A signat	ture is required by all parties listed	on the account.	
			_	
First Name	Middle Initial	Last Name	Suffix	
First Name	Middle Initial	Last Name	Suffix	
Ema	I this completed	form to: <u>contact@expanden</u>	ergy.com	

Customer Reference ID#\_\_\_\_\_(for internal use only)