## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington,	DC	205/19
wasiiiiiqtoii,	D.C.	20049

Washington,	D.C.	20549	

OMB APPROVAL									
OMB Number:	3235-028								
Estimated average burden									

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

37 hours per response: 0.5

					or	Sect	ion 30(h	n) of th	è Ínvestmen	t Cor	npany Act	of 19	40						
1. Name and Address of Reporting Person*  COLLETT LAWRENCE A					<u>C</u>	2. Issuer Name and Ticker or Trading Symbol CASS INFORMATION SYSTEMS INC CASS ]									5. Relationship of Reporting Person(s) to Issue (Check all applicable)  X Director 10% Owner.				vner
(Last) 13001 H	•	irst) RG DRIVE	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 10/26/2007								X Officer below)	(give title	Chairr	Other (s below) man	specify	
(Street) BRIDGE			63044		4. 1	f Ame	endmen	t, Date	e of Original	Filed	i (Month/Day/Year)				6. Individual or Joint/Group Filing (Check Applic Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
(City)	(5	•	(Zip)	. Doris	vativ		ouriti	oc A	oguirod	Dic	nocod o		r Pon	oficia	Ily Ownor				
Date		2. Trans			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code (I	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,		(A) or	5. Amou Securitie Benefici Owned F	nt of es ally Following	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D) P		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common	Stock			10/2	6/200	7			S		549	D		\$3	7 163	,995	D		
Common	Stock <sup>(2)</sup>														14	,721		D	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	L. Title of 2. 3. Transaction Date Execution Date, Transaction Executive or Exercise (Month/Day/Year) if any Code (Instr.				5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)					s ecurity	Derivative Security	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	O N	amount or lumber of Shares	1				
Employee Stock Option (right to buy)	\$9.717								01/02/2009 <sup>(</sup>	1) 0	1/02/2009		nmon ock	428		428		D	
Employee Stock Option (right to buy)	\$10								01/02/2010 <sup>(</sup>	1) 0	1/02/2010		nmon ock	20,317	,	20,317		D	
Employee Stock Option (right to buy)	\$13.455								01/02/2011 <sup>(</sup>	1) (	1/02/2011		nmon	9,585		9,585	5	D	
Employee Stock Option (right to buy)	\$16.222								01/02/2012 <sup>(</sup>	1) 0	1/02/2012		nmon ock	5,240		5,240	)	D	
Employee Stock Option (right to buy)	\$22.733								01/02/2013 <sup>(</sup>	1) 0	1/02/2013		nmon ock 1	12,472	!	12,47	2	D	

## **Explanation of Responses:**

- 1. Exercisable date may be accelerated based on attainment of certian financial performance criteria.
- $2. \ Restricted \ stock; \ restrictions \ expire \ equally \ over \ a \ three-year \ period \ from \ grant \ date.$

/s/ Lawrence A. Collett

11/01/2007

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.