FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| Washington, | D.C. | 20549 | |
|-------------|------|-------|--|
|-------------|------|-------|--|

| OMB APPROVAL | | | | | | |
|--------------|---------|--|--|--|--|--|
| 011011 | 2225 22 | | | | | |

| OMB Number: | 3235-0287 |
|---------------------|-----------|
| Estimated average b | urden |
| hours por rosponso: | 0.1 |

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 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* <u>COLLETT LAWRENCE A</u> | | | <u>CA</u> | 2. Issuer Name and Ticker or Trading Symbol CASS INFORMATION SYSTEMS INC CASS] | | | | | | | | | plicable) ector | | Person(s) to Issuer 10% Owner | | | |
|--|---------|--|--|---|--|---|-------|-----------------------------------|--|--|--------------------|--|---|---|--|-------------|--|--|
| (Last) 13001 HO | (Firs | , | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/06/2012 | | | | | | | | Officer below) | (give title | | Other (s below) | specify |
| (Street) BRIDGET | ON MO |) 6 | 63044 | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (Sta | | Zip) | n_Deriv | rative | - So | curit | ios Acc | nuired | Die | nosed of | or Bon | eficiall | v Owned | | | | |
| 1. Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Year) | | ar) | 2A. Deemed Execution Date, | | 3. Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | (A) or | 5. Amour Securitie Beneficia Owned F | s Illy | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | Reported Transacti (Instr. 3 a | on(s) | | [| (Instr. 4) | |
| Common Stock | | | | 11/06 | 1/06/2012 | | | | M | | 15,091 | A | \$18.7 | 9 122 | ,546 | D | | |
| Common S | itock | | | 11/06 | 5/2012 | 2 | | | F | | 6,443 | D | \$44.0 | 1 116 | 116,103 D | | | |
| Common Stock | | | | | | | | | | | | | 80,054 | | I h | | Shares held by spouse | |
| | | ٦ | | | | | | | | | osed of, o | | | Owned | | | | |
| Derivative Conversion Date | | 3. Transaction Date (Month/Day/Year) 3. A. Deem Execution if any (Month/D | | Date, | 4. Transaction Code (Instr. 8) | | n of | | 6. Date Exercis Expiration Date (Month/Day/Yea | | e | 7. Title an of Securit Underlyin Derivative (Instr. 3 a | ties ig e Security | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | g g d | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | ble | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Employee Stock Option (right to buy) | \$18.79 | 11/06/2012 | | | M | | | 15,091 | 01/02/2 | 012 | 01/02/2013 | Common Stock | 15,091 | \$18.79 | 0 | | D | |
| Stock Appreciation | \$25.83 | | | T | | | | | 01/22/20 | 09 ⁽¹⁾ | 01/21/2018 | Common Stock | 32,945 | | 32,94 | 15 | D | |

Explanation of Responses:

1. Over a three-year vesting period, SARs become exercisable in one-third increments on the anniversary date of the grant.

/s/ Lawrence A. Collett

11/08/2012

** 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.