

EDXC Clearing Member Firm — Clearing Portal User Access Request

Clearing Member Firm:

Full Name	Email Address	Title	Primary Location	User Pr Read/Write	ivileges Read-Only	Authorized User

Authorized User(s) are those persons who are authorized to submit new users, alter custodian(s) and/or bank accounts and otherwise act on behalf of the firm.

I hereby certify that I am duly authorized to act on behalf of the above-named Clearing Member Firm, and that the information in this request is accurate; by submitting this request, I acknowledge that any changes made to the Firm's EDXC Clearing Portal User list based on this request shall be deemed valid for processing. I further agree to notify EDX Clearing should any of the above-listed information change.

Authorized User:

Signature:

Print Name:

Date:

Email completed request form to edxclearingsupport@edxmarkets.com.

CONFIDENTIAL