

OPTION ACCOUNT APPLICATION

For Office Use Only: IE Account Number: New Account Update to Existing Account

1. ACCOUNT TYPE: Please check one box only.

- | | |
|---|--|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Retirement Trust |
| <input type="checkbox"/> Custodian for Minor | <input type="checkbox"/> Voluntary Association |
| <input type="checkbox"/> Estate/Conservatorship | <input type="checkbox"/> IRA |
| <input type="checkbox"/> Personal Trust | <input type="checkbox"/> KEOGH |
| <input type="checkbox"/> Other _____ | |

2. ACCOUNT INFORMATION

ACCOUNT TITLE	ACCOUNT ADDRESS

3. INVESTMENT PROFILE *This section must be completed unless accompanied by New Account Application.*

Annual Income	Liquid Net Worth (cash, securities, etc.)	Total Net Worth (excluding home)	Tax Bracket
<input type="checkbox"/> \$ 50,000 or less <input type="checkbox"/> \$500,000 or less <input type="checkbox"/> \$100,000 or less <input type="checkbox"/> \$1 million or less <input type="checkbox"/> \$200,000 or less <input type="checkbox"/> Over \$1 million	<input type="checkbox"/> \$ 50,000 or less <input type="checkbox"/> \$500,000 or less <input type="checkbox"/> \$100,000 or less <input type="checkbox"/> \$1 million or less <input type="checkbox"/> \$200,000 or less <input type="checkbox"/> Over \$1 million	<input type="checkbox"/> \$ 50,000 or less <input type="checkbox"/> \$500,000 or less <input type="checkbox"/> \$100,000 or less <input type="checkbox"/> \$1 million or less <input type="checkbox"/> \$200,000 or less <input type="checkbox"/> Over \$1 million	_____ % <input type="checkbox"/> Decline to state

Investment Objective(s) <i>If choosing more than one objective, please rank in order of priority.</i>	Risk Tolerance
_____ Conservation of Capital <i>Emphasis on investments that are most likely to preserve principal. Low risk.</i> _____ Income <i>Emphasis on investments that generate income.</i> _____ Growth <small>(also called Capital Gains)</small> <i>Emphasis on investments more likely to appreciate in principal rather than generate income.</i> _____ Speculation <i>Emphasis on potential for significant appreciation; willing to accept a high risk for loss of principal.</i> _____ Trading <i>Seeks to take advantage of short term trading opportunities. High turnover, high risk.</i>	<input type="checkbox"/> Conservative <i>I want to preserve my initial principal in this account, with minimal risk, even if it means this account does not generate significant income or returns and may not keep pace with inflation.</i> <input type="checkbox"/> Moderate <i>I am willing to accept some risk to my initial principal and tolerate some volatility to seek higher returns, and understand I could lose a portion of the money invested.</i> <input type="checkbox"/> Aggressive <i>I am willing to accept maximum risk to my initial principal to aggressively seek maximum returns, and understand I could lose all, or most all, of the money invested.</i>

4. OPTIONS TRADING QUESTIONNAIRE

Please select the anticipated type(s) of option transactions. * Margin account required

1. COVERED WRITING <input type="checkbox"/> YES <input type="checkbox"/> NO	4. * UNCOVERED PUT WRITING <input type="checkbox"/> YES <input type="checkbox"/> NO
2. PURCHASING CALLS AND PUTS <input type="checkbox"/> YES <input type="checkbox"/> NO	5. * UNCOVERED CALL WRITING <input type="checkbox"/> YES <input type="checkbox"/> NO
3. * SPREADS (PUTS AND CALLS) <input type="checkbox"/> YES <input type="checkbox"/> NO	6. * UNCOVERED INDEX <input type="checkbox"/> YES <input type="checkbox"/> NO

OPTIONS INVESTMENT EXPERIENCE	OPTIONS INVESTMENT KNOWLEDGE
None < 5 years 5 + years	Limited Moderate Extensive
Covered Writing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Covered Writing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Purchasing Calls and Puts <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Purchasing Calls and Puts <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Spreads (Puts and Calls) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Spreads (Puts and Calls) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Uncovered Put Writing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Uncovered Put Writing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Uncovered Call Writing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Uncovered Call Writing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Uncovered Index <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Uncovered Index <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

5. MUST BE SIGNED BY ALL PARTIES

Type of account to be added (please check only one): **OPTION CASH ACCOUNT** **OPTION MARGIN ACCOUNT**

In addition to other applicable agreements and supplements set forth herein, the Entity agrees to abide by the Option Supplement. By signing below, the Entity represents that it has received, read and understood the Characteristics and Risks of Standardized Options (www.optionsclearing.com/about/publications/character-risks.jsp) and the January 2011 Supplement of Characteristics and Risks of Standardized Options and the March 2011 Supplement to Characteristics and Risks of Standardized Options. If the Entity wants to engage in uncovered option transactions, it represents that it has an annual income of over \$100,000 and a net worth of over \$250,000 or such other minimum amounts as may be required by Broker. The Entity is deemed to represent each and every time it places a listed options order that such information is accurate and complete. The Entity agrees to inform Broker promptly of any changes to such information.

Applicant Signature: _____ **Print Name:** _____ **Date:** _____
Co-Applicant Signature: _____ **Print Name:** _____ **Date:** _____

Approvals – FOR OFFICE USE ONLY			
IE Signature	Printed Name	Date	Approval Level
Managers Signature	Printed Name	Date	
CCO Signature	Printed Name	Date	
ROSP Signature	Printed Name	Date	
Date Client Account Agreements Furnished: _____	Date OCC Disclosure Furnished: _____	Date Completed Form Sent to Client: _____	