



**LIMITED TRADING AUTHORIZATION FORM  
FOR PURCHASE AND SALE OF SECURITIES, OPTIONS, AND COMMODITIES**

ACCOUNT NUMBER	SSN/ID NUMBER
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TO: The Introducing Broker AND  
Apex Clearing Corporation

The undersigned hereby authorizes \_\_\_\_\_ (whose signature appears below) as his agent and attorney in fact to buy, sell (including short sales) and trade in stocks, bonds and any other securities and/or commodities and/or contracts relating to the same on margin or otherwise in accordance with your terms and conditions for the undersigned's account and risk and in the undersigned's name, or number on your books. \*Said agent is specifically authorized to effect options transactions or to uncover a covered option position for my account, as such terms are defined in the Options Clearing Corporation disclosure document entitled "Characteristics and Risks of Standardized Options", a copy of which I have received. The undersigned hereby agrees to indemnify and hold you harmless from and to pay you promptly on demand any and all losses arising therefrom or debit balance due thereon.

In all such purchases, sales or trades you are authorized to follow the instructions of the above named agent in every respect concerning the undersigned's account with you, and he is authorized to act for the undersigned and in the undersigned's behalf in the same manner and with the same force and effect as the undersigned might or could do with respect to such purchases, sales or trades as well as with respect to all other things necessary or incidental to the furtherance or conduct of such purchases, sales or trades.

The undersigned hereby ratifies and confirms any and all transactions with you heretofore or hereafter made by the aforesaid agent or for the undersigned's account.

This authorization and indemnity is in addition to (and in no ways limits or restricts) any rights which you may have under any other agreement or agreements between the undersigned and your firm.

This authorization and indemnity is also a continuing one and shall remain in full force and effect until revoked by the undersigned by a written notice addressed to you and delivered to your main office, but such revocation shall not affect any liability in any way resulting from transactions initiated prior to such revocation. This authorization and indemnity shall inure to the benefit of your present firm and of any successor firm or firms irrespective of any change or changes at any time in the personnel thereof for any cause whatsoever, and of the assigns of your present firm or any successor firm, and shall be binding on the undersigned, his heirs, executors, administrators and assigns and shall be governed by the laws of the State of Texas.

If agent conducts trades in futures markets on behalf of the undersigned, agent hereby represents as follows:

- Agent is either registered as a commodity trading advisor with the Commodity Futures Trading Commission ("CFTC") and is a member of National Futures Association ("NFA"), or
- Agent is exempt from CFTC registration and NFA membership requirements based on one or more of the following exclusions (Agent to indicate which exclusions apply)

- You have provided advice to 15 or fewer persons during the past 12 months and do not generally hold yourself out to the public as a CTA or
- You are in one of a number of businesses or professions listed in the Commodity Exchange Act or are registered in another capacity and your advice is solely incidental to your principal business or profession or
- You are providing advice that is not based upon knowledge of or tailored to customer's particular commodity interest account, particular commodity interest trading activity, or other similar types of information, such as, for example:

You make recommendations, such as advice to buy or sell specific futures contracts should a particular price level be reached, through newsletters, books and periodicals. The advice includes specific recommendations and the recipients of publications all receive the same advice or you provide specific advice through e-mails, facsimiles, an Internet web site, telephone calls or face-to-face meetings with customers consisting of instructions to buy or sell a futures contract based on a computerized trading system, which also is available for purchase and use on a personal computer, and the customers all receive the same advice or You conduct seminars at which you teach attendees how to trade commodity futures contracts aided by a software program that you sell and you invite seminar attendees to participate in a question-and-answer session at which you provide commodity trading advice without asking or receiving information about the personal characteristics of the attendees.

Agent and the undersigned represent that Agent has provided the undersigned with a copy of Agent's most recent CFTC disclosure document or that Agent is not required to deliver such document with the reasons therefore included on form below.

REASONS	

SIGNATURE OF ACCOUNT OWNERS			
SIGNATURE		DATE	
NAME	AGE	CITY	STATE
SIGNATURE		DATE	
NAME	AGE	CITY	STATE

SIGNATURE OF AUTHORIZED AGENT			
SIGNATURE		DATE	
NAME	AGE	CITY	STATE

AUTHORIZED AGENT/ATTORNEY-IN-FACT			
NAME		PHONE NUMBER	DATE OF BIRTH
ADDRESS			
CITY	STATE		ZIP CODE
SOCIAL SECURITY NUMBER	U.S. CITIZEN <input type="checkbox"/> Yes <input type="checkbox"/> No	IF NO, WHAT COUNTRY	
FTIN (Required for Foreign Persons)		COUNTRY OF ISSUE	

**GOVERNMENT IDENTIFICATION** \*Please only complete the Government Identification section if you are a resident of Australia. This requirement is due to the Foreign TIN exception.  
*Attach a color copy of the photo identification*

TYPE OF IDENTIFICATION			
<input type="checkbox"/> Driver's License		<input type="checkbox"/> INS Permanent Resident Alien Card	
<input type="checkbox"/> Passport		<input type="checkbox"/> Foreign National Identification Document	
<input type="checkbox"/> Other: _____			
IDENTIFICATION NUMBER	STATE/COUNTRY OF ISSUANCE	ISSUE DATE	EXPIRATION DATE

EMPLOYMENT INFORMATION	
NAME OF EMPLOYER	POSITION

AFFILIATIONS	
Is the Authorized Agent a Control Person of a publicly traded company? (Director, Officer, or 10% Stockholder) If YES: Provide the name of the company(s) and the stock ticker symbol(s) below. I/We promise to notify you of any changes. Company(s)/Ticker Symbol(s): _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the Authorized Agent an employee of, or affiliated with, the Introducing Broker firm?  If NO: Is the Authorized Agent affiliated with, work with, or work for another member firm of a Stock Exchange or FINRA?  If YES: Provide the name of Firm: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No  <input type="checkbox"/> Yes <input type="checkbox"/> No