



SCHEDULE C

ADDITIONS, DELETIONS, CHANGES, TRANSFERS AND ASSIGNMENT

This Schedule C is being executed pursuant to the Data Center Connection Agreement (the “Agreement”) between CHICAGO MERCANTILE EXCHANGE INC., a Delaware corporation with its principal place of business at 20 South Wacker Drive, Chicago, Illinois 60606, U.S.A. (“CME”) and _____ (“Customer”).

This Schedule contains the following Exhibits:

Exhibit A: Additions, Deletions and Changes – This Exhibit should be completed by existing Customers.

Exhibit B: Assignment and Transfers – This Exhibit should be completed by Customers who are assigning the Agreement or transferring ownership of existing CME connections, to a new entity.

EXHIBIT A
ADDITIONS, DELETIONS AND CHANGES

This Exhibit A is being executed pursuant to Schedule C of the Data Center Connection Agreement (the “Agreement”) between Chicago Mercantile Exchange Inc. a Delaware corporation with its principal place of business at 20 South Wacker Drive, Chicago, Illinois 60606, U.S.A. and the Customer listed below in Section I.

Notwithstanding anything to the contrary in the Data Center Connection Agreement, billing for connectivity will begin on the date that successful testing of the connection is completed.

Section I: CUSTOMER INFORMATION		
Customer Name: _____		
Customer Address: _____		
City: _____	State/Province: _____	Country: _____
Floor/Suite: _____	Postal Code: _____	Phone Number: _____
<u>Customer Contact</u>		
Name: _____	Title: _____	
Phone: _____	Mobile: _____	E-mail: _____
<u>Technical Contact</u>		
Name: _____	Title: _____	
Phone: _____	Fax: _____	
Mobile: _____	E-mail: _____	

Section II: DELETE CIRCUIT REQUEST

Site ID(s) (circuit number): _____

Current Connectivity Method:

- CME Globex Hub
- CME DIRECTLink (CME Managed Circuits/Routers)
- Client INTERNETLink
- CME NYDR VPN
- CME LNet
 - DRT
 - Equinix
 - Savvis
 - telx
 - Open
- Jackson Direct
 - Cogent
 - Fibernet
- CME GLink
- CME EConnect
 - telx
 - Sidera

Reason for Delete (*Please ensure box is checked*)

- Migration to:
 - CME Glink
 - CME LNet
 - CME DIRECTLink
 - CME EConnect
 - Other (please indicate) _____
- Consolidation
- No longer cost effective
- No longer using the connection
- Company no longer in business
- Deleted by CME Group
- Other _____

Section III: MOVE CIRCUIT REQUEST

A. Move CME DIRECTLink

Existing Location:

Site ID: _____

Floor & Suite: _____

New Location: _____

New Address: _____

New City: _____

New State/Region: _____

New Country: _____

New Postal Code: _____

On-site Phone Number: _____

Special Instructions: _____

B. Move CME LNet

Existing Location:

Site ID: _____

Floor & Suite: _____

Cabinet & Rack Location: _____

Third Party Participant: _____

New Location:

Floor & Suite: _____

Cabinet & Rack Location : _____

Third Party Participant: _____

C. Move Jackson Direct

Existing Location:

Site ID: _____

Floor & Suite: _____

Cabinet & Rack Location: _____

Third Party Participant: _____

New Location:

Floor & Suite: _____

Cabinet & Rack Location : _____

Third Party Participant: _____

D. Move CME GLink

Existing Location:

Site ID: _____

Floor & Suite: _____

Cabinet & Rack Location: _____

Third Party Participant: _____

New Location:

Floor & Suite: _____

Cabinet & Rack Location : _____

Third Party Participant: _____

Section IV: UPGRADE/DOWNGRADE CIRCUIT REQUEST

A. Upgrade CME DIRECTLink (CME Managed Circuit) (Bandwidth)

Site ID: _____
Indicate Current Bandwidth _____

Frame Connections: _____

(Frame connections upgrading to Ethernet—require a new circuit installation and a 12 month commitment)

T1

Ethernet Connections:

20Mb Ethernet

40Mb Ethernet

100Mb Ethernet (upgrades to 100Mb are subject to a new 12 month commitment)

Special Instructions: _____

B. Upgrade / Downgrade CME Globex Hub Connection

Site ID: _____
Current Bandwidth: _____

Upgrade / Downgrade to:

Select City, Data Center and providetelecommunications pProvider and bandwidth:

Order number: _____

a. London CME Globex facility

Verizon/UK5London

facility

Interoute/GlobalSwitch

London

facility

b. Check One: Milan Paris Sao Paulo

VZB facility _____

Sprint facility _____

c. Singapore CME Globex Hub

AT&T facility _____

NTT facility _____

d. Seoul CME Globex Hub

VZB facility _____

NTT facility _____

e. Kuala Lumpur CME Globex Hub

AIMS facility _____

Cyberjaya facility _____

f. Mexico City CME Globex Hub

REDit Data Center _____

[] KIO Data Center _____

C. Upgrade / Downgrade CME LNet

Site ID: _____

Upgrade to:

100 Mb Ethernet

Downgrade to:

40 Mb Ethernet

Floor and Suite Location: _____

Cabinet and/or Rack Location: _____

If space is leased through third party, please name: _____

Special Instructions: _____

D. Upgrade /Downgrade Jackson Direct

Site ID: _____

Upgrade to:

100 Mb Ethernet

Downgrade to:

40 Mb Ethernet

Floor and Suite Location: _____

Special Instructions: _____

E. Upgrade / Downgrade CME GLink

Site ID: _____

Upgrade to:

10 Gbps inbound rate limited to 1 Gbps

Downgrade to:

1 Gbps

Cabinet and/or Rack Location: _____

If space is leased through third party, please name: _____

Special Instructions: _____

Section V: CHANGE IN BANK AND ACCOUNT AUTO-DEBIT INFORMATION

All fees will be auto-debited from the bank account identified below. *A voided check from the account must be attached to this Access Request and Change Form for verification purposes.*

Name of Bank: _____

Name on Bank Account: _____

Bank Address: _____

City: _____ State/Province: _____

Country: _____ Postal Code: _____

Transit/ABA Number: _____

Account Number: _____

Section VI: NAME CHANGE (To assign your Connection Agreement or to transfer a circuit to a different firm please complete Exhibit B)

Name: _____

Effective Date: _____

Reason for Name Change: _____

Customer has caused this Exhibit A to be executed by its authorized representative, to be effective as of the date received by CME.

Customer

Signature: _____

Name : _____

Title: _____
(Must be an authorized signatory)

Date: _____

Please return completed documentation to:

CME Global Account Management 20 South Wacker Chicago, IL 60606 Phone: 312.634.8700 Fax: 312.634.1568	CME Global Account Management European Office One New Change 4th Floor London EC4M 9AF Phone: +44.20.3379.3754 Fax: +44.20.3379.3888
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CME Global Account Management – Asian Office Kwong Cheng 50 Raffles Place #47-01 Singapore Land Tower Singapore 048623 Phone: +65 6593 5574 Fax: +65 6593 5575
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EXHIBIT B
ASSIGNMENT & TRANSFERS

This Exhibit B is being executed pursuant to Schedule C of the Data Center Connection Agreement (the "Agreement") between Chicago Mercantile Exchange Inc., a Delaware corporation with its principal place of business at 20 South Wacker Drive, Chicago, Illinois 60606 ("CME") and the Customer listed below in Section 1. This Exhibit should be completed by Customers who are assigning their existing CME connections to a new entity.

Section I: ASSIGNMENT OR TRANSFER

Check the appropriate box below:

- This is a request for an assignment of the Agreement
 This is a request for a transfer of ownership for an existing connection

Section II: EXISTING CUSTOMER INFORMATION

A. Name and Location:

Customer Name: _____

Company Address: _____

Floor/Suite: _____ City: _____ State/Province: _____

Country: _____ Postal Code: _____

B. Contact Information:

Primary Contact: _____

Phone: _____ Mobile: _____ E-mail: _____

Secondary Contact: _____

Phone: _____ Mobile: _____ E-mail: _____

Section III: NEW CUSTOMER INFORMATION

A. Customer Name and Location Information

Customer Name: _____

Company Address: _____

Floor/Suite: _____ City: _____ State/Province: _____

Country: _____ Postal Code: _____ Phone Number: _____

B. Contact Information

Primary Contact: _____

Phone: _____ Mobile: _____ E-mail: _____

Secondary Contact: _____

Phone: _____ Mobile: _____ E-mail: _____

C. Billing Address

Customer Name: _____

Company Address: _____

Floor/Suite: _____ City: _____ State/Province: _____

Country: _____ Postal Code: _____ Phone Number: _____

D. Clearing Information for New Customer

Class A Clearing Firm Name: _____ Class A Clearing Firm # _____

Sub/Affiliate Name: _____ Sub/Affiliate # _____

Main Phone: _____

E. Bank and Account Information of new Firm

1. If Company will be billed directly, provide the following account auto-debit information:

Company billing Contact: _____

Phone: _____ Mobile: _____ E-mail: _____

Name of Bank used by Company: _____

Name on Bank Account: *(a voided check from the account must be attached for verification purposes):*

Bank Address: _____

City: _____ State/Province: _____

Country: _____ Postal Code: _____

Transit/ABA Number: _____ Account Number: _____

2. If a person or entity other than Company will be billed, provide the following information:

Name of CME Account to be billed* _____

CME Account Number: _____

* The person /entity that holds the CME Account must provide separate written authorization confirming this billing arrangement.

Section IV: Connectivity Information:

Site ID(s): _____

CME DIRECTLink CLIENT INTERNETLink

CME Globex Hub CME LNet _____

Jackson Direct CME CERTLink

CME EConnect CME GLink

Existing Customer (assignor) and New Customer (assignee) have caused this Exhibit A to be executed by their authorized representatives, to be effective as of the date received by CME.

Existing Customer (assignor)

Signature: _____

Print Name: _____

Title: _____
(*must be an authorized signatory*)

Date: _____

New Customer (assignee)

Signature: _____

Print Name: _____

Title: _____
(*must be an authorized signatory*)

Date: _____

Please return completed documentation to:

CME Global Account Management 20 S Wacker Dr., Chicago, IL 60606 Phone: 312.634.8700 Fax: 312.634.1568	CME Global Account Management - European Office Mark Vogel One New Change 4th Floor London EC4M 9AF Phone: +44.20.3379.3754 Fax: +44.20.3379.3888
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CME Global Account Management – Asian Office Kwong Cheng 50 Raffles Place #47-01 Singapore Land Tower Singapore 048623 Phone: +65 6593 5574 Fax: +65 6593 5575
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