

BID TO PURCHASE MEMBERSHIP INTEREST IT IS THE PURCHASER'S RESPONSIBILITY TO CANCEL THIS BID TO PURCHASE

Purchaser is:	Individual	Entity			Amount of Initial I	3id		
Name of Individual Purchaser or Entity**								
							Enter Opposing Party	
Select Divisio	n Is this a	Is this a matched Sale? No						
CME	IMM	IOM	GEM		GIM (No Trading Privileges)			
FULL	AM	IDEM	СОМ		NYMEX	COMEX	COMEX OPTIONS	

Note: Bids will only be posted when funds have been wired in advance or when the Clearing Firm guarantee has been received.

- 1. Bid is made on behalf of the above Individual or Entity, "Purchaser." The undersigned agree that in event this bid to purchase is accepted, that we are jointly and severally responsible for the performance of this contract to purchase a membership interest.
- 2. Purchaser with a bid guarantee agrees to deposit with the Exchange* within (2) business days after purchase, payment by wire only to the Exchange for the full amount of the purchase price together with the applicable fee.
- 3. Further, the undersigned hereby authorizes and directs the Exchange to post said bid appropriately and agrees to be bound by the rules of the Exchange with respect to the purchase of the membership interest.
- 4. By Signing your name in the space below, you are acknowledging that you have read and understand the Membership Market Procedures and all answers provided on this form are true.

Purchaser/Authorized Signer						
Print Name of Individual Purchaser or Authorized Signer	Address					
Tax ID/SSN Number	City	State/Province				
	/=:					
Phone Type Area Code - Phone Number	Postal/Zip Code Country/Territory					
Dhana Tana	Email Address					
Phone Type Area Code - Phone Number	Ellidii Address					
Signature of Individual Purchaser or Authorized Signer	Signature Date					
Please include the appropriate completed Tax Form when submittin	Please include the appropriate completed Tax Form when submitting this form. (e.g., W-9, W-8BEN, W-BEN-E)					
Authorized Negotiator						
Authorized Negotiator designated: No Yes						
Authorized Negotiator Name	Phone Type Area	a Code - Phone Number				
Email Address	Phone Type Area	a Code - Phone Number				
No Yes A. Does anyone else have an ownership in	iterest in this membersh	ip interest? If yes, explain.				
No Yes B. Do you have any type of underlying ag	•	·				
interest with any other person or entity, including a member or a clearing member? If yes, explain.						

If you answered Yes to either question above, please complete the information on the following page.

^{*}Exchange Refers to CME, CBOT, NYMEX & COMEX throughout this document.

^{**}Application Required (See <u>instructions</u> for details)



What financial arrangements exist with respect to the purchase and use of this membership? Check all that apply.

Financial Arrangements

☐ 1. Bank Loan					
		Yes	No		
Name of Bank		Loan is Secu	ired?	By What?	
		Yes	No		
Bank Address		Loan Guarai	iranteed?	By whom?	
City	State/Province			Postal/Zip	Country/Territory
☐ 2. Personal or	Other Loan				
		Yes	No		
Name of Person or Entity		Loan is Secured?		By What?	
		Yes	No		
Bank Address		Loan Guarai	nteed?	By whom?	
City	State/Province			Postal/Zip	Country/Territory
City	State/Flovince			ΓΟ3ται/ Σίβ	Country/ Territory
□ 2 Oth		. 1			
☐ 3. Other arrang	ements (Please explain	1)			

Provide explanation of financial arrangements with supporting documents, e.g., notes, written instruments, guarantees, or trust agreements. Include any payment schedules.

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^{**}Application Required (See <u>instructions</u> for details)