

Firm Name:

Designated Spokesperson and Authorized Person Form

CME Group Inc. requires firms to designate a Designated Spokesperson(s) and Authorized Person(s) who shall be authorized to deal with the Exchanges with respect to memberships owned or leased by the firm, as applicable, and who shall be authorized to represent the firm before the Exchanges. Such authorized representatives shall be responsible to the Exchanges as if such person was a member as defined by Rule 400.

CME Group may only discuss the application and information provided pursuant thereto with those individuals designated by the firm as a Designated Spokesperson and/or an Authorized Person. Please provide a complete listing of the firm's Designated Spokesperson(s) and Authorized Person(s) below. Changes to the list of Designated Spokesperson(s) or Authorized Person(s) may only be made in writing by completing and emailing an updated Designated Spokesperson and Authorized Person Form located at www.cmegroup.com/memberships to CME Group's Concierge Team at conciergeteam@cmegroup.com. CME Group collects and uses personal information for the purposes for which it was obtained. For further information please reference CME Group's Privacy Policy or contact the Privacy Office at privacy@cmegroup.com.

Name	Job Title	Phone Number	Email Address	Authorized Person ¹	Designated Spokesperson ²
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1 An Authorized Person shall be defined as an authorized representative who shall have the authority to make membership and/or incentive program related decisions on behalf of the firm including, but not limited to, applying, changing, or withdrawing membership and/or incentive program status, request to deposit or withdraw required seats and/or shares and the buying, selling, releasing or transferring of seats and shares. In addition, an Authorized Person shall have the same authority as the Designated Spokesperson noted below.

2 A Designated Spokesperson(s) shall be defined as an authorized representative whereby CME Group, at its sole discretion, may provide or discuss any membership and/or incentive program related information specific to the firm.

I attest that the information provided above is accurate and complete. This form shall supersede any previously submitted Designated Spokesperson and Authorized Person Form.

Signed: *

Name (printed)

Position

Date

* Authorized Officer, Managing Member of an LLC or Partner. Signor should also be designated as an Authorized Person above.