

**SCHEDULE 9**  
**FIRMSOFT ACCESS REQUEST**

Customer and Clearing Firm agree to authorize FirmSoft access for the users identified below.

Any information required to be provided in this Schedule shall be treated by CME in accordance with the CME privacy statement, which may be found at [www.cmegroup.com](http://www.cmegroup.com).

<b>Complete the following for each individual for whom you are requesting access.</b>			
All the information listed below is required; incomplete requests will not be processed.			
<b>Request Type</b> (select one):	Add FirmSoft Access	Change (Add/Remove Affiliate Firms)	Delete FirmSoft Access
<b>Access Type</b> (select one):	All Inquiry and Cancel	All Inquiry Only	
User's Name: _____		Class A or Affiliate Firm Number(s): _____	
CME Group Login: _____		CME Group Login Token: _____	
Account(s):	Operator ID:	iLink Session(s):	
<b>Request Type</b> (select one):	Add FirmSoft Access	Change (Add/Remove Affiliate Firms)	Delete FirmSoft Access
<b>Access Type</b> (select one):	All Inquiry and Cancel	All Inquiry Only	
User's Name: _____		Class A or Affiliate Firm Number(s): _____	
CME Group Login: _____		CME Group Login Token: _____	
Account(s):	Operator ID:	iLink Session(s):	
<b>Request Type</b> (select one):	Add FirmSoft Access	Change (Add/Remove Affiliate Firms)	Delete FirmSoft Access
<b>Access Type</b> (select one):	All Inquiry and Cancel	All Inquiry Only	
User's Name: _____		Class A or Affiliate Firm Number(s): _____	
CME Group Login: _____		CME Group Login Token: _____	
Account(s):	Operator ID:	iLink Session(s):	

*"All personal information provided under this form will be used, distributed, and maintained in accordance with [CME Group's Privacy Policy](#). If completing this form on behalf of another individual, you will ensure that you have the required consent from those individuals to whom the personal information relates, or you satisfy an applicable legal basis for doing so, in compliance with all applicable laws, to enable CME Group to process such personal information."*

<b>Request Type</b> (select one):	Add FirmSoft Access	Change (Add/Remove Affiliate Firms)	Delete FirmSoft Access
<b>Access Type</b> (select one):	All Inquiry and Cancel	All Inquiry Only	
User's Name: _____	Class A or Affiliate Firm Number(s): _____		
CME Group Login: _____	CME Group Login Token: _____		
Account(s): _____	Operator ID: _____	iLink Session(s): _____	

Customer and Clearing Firm have caused this Schedule 9 to be executed by their authorized representatives, to be effective as of the date received by CME.

**Customer**

**Clearing Firm**

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_  
(Must be an authorized Officer)

Title: \_\_\_\_\_  
(Must be an authorized Officer)

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**Contact GAM:**

For questions, assistance or upon completion, contact [CME Global Account Management](#).

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