BROKER TO BROKER TRANSFER AUTHORITY FORM - OPTIONS

Please complete this form if you wish to transfer Options Positions from another Broker to FinClear Services Pty Ltd (**FinClear**).

Important: PLEASE ATTACH A COPY OF YOUR LATEST POSITION STATEMENT

1. ACCOUNT DETAILS					
Name in which account is held with PhillipCapital / FinClear			Accou	nt Number	
((Internal Use Only)				
2. EXISTING BROKER DETAILS (Transferring B					
For your transfer to be successful, your registration details		s) on tl	his form must a	gree with the	
details on your account with PhillipCapital \Breve{f} FinClear . If no before we can process this transfer.					
Registered name and address as recorded on your latest State	tement				
Account Designation or Trust (if applicable) eg: <x&y superfu<="" td=""><td>und A/C></td><td></td><td></td><td></td></x&y>	und A/C>				
Name of existing broker					
Account Number Holder Identification Number (HIN)			Broker PID		
Account Number Holder Ider	itilication number (HIN)		Бго	ker PID	
Please select one option: ☐ Please transfer ALL Options from existing broker to Fire	nClear (PID 1791); or				
Please transfer only those positions shown in the attac (PID 1791); or	hed statement /confirmation	n note f	from existing br	oker to FinClear	
☐ Please transfer only those positions listed below from €	existing broker to FinClear (PID 17	91)		
Option Positions to be transferred					
Call / Put, Expiry Month, Strike	Quantity		Trade Price	е	
Attach a separate sheet if additional option positions are required	to be transferred				
Agreement: I/we authorise FinClear to transfer the existing Options Pos	sitions as detailed above to	my/our	· PhillipCapital /	FinClear accoun	
Signature of Account Holders Requesting Transfer*:		·			
Full name	Signature			Date	
				/ /	
Full name	Signature		1	Date	
				1 1	
Full name	Signature			Date	
				/ /	