



1. PROCASH PLUS™ ACCOUNT ESTABLISHMENT

You can open a ProCash Plus account in your choice of Silver, Gold, or Platinum. Please select from one of the following:

- ☐ Silver (no initial minimum investment)
☐ Gold (\$10,000 initial minimum investment)
☐ Platinum (\$20,000 initial minimum investment)

You may meet the minimum investment with any combination of cash and/or marginable securities. ProCash Plus Silver accounts require a fee for asset balances below \$5,000 per month; should the asset balance fall below \$5,000 as of the second-to-last business day of the month, a \$2.00 fee will be applied on the last business day of the month. This fee may be higher at the discretion of your Introducing Financial Organization. Please review the Financial Terms card for all account related fees.

Current Account Number:

Form for current account number with a hyphen separator.

Please provide the following information as it appears on your current account statement:

Primary Account Owner's Name (please print) Date

Joint Account Owner's Name (if applicable; please print)

Form for joint account owner's social security number with a hyphen separator.

Joint Account Owner's Social Security Number (if applicable)

Mailing address for checks and/or debit cards (if different from the primary residence that appears on your account statement):

Form for mailing address with multiple lines.

SIGN HERE IF AN ALTERNATE MAILING ADDRESS IS REQUESTED:

Primary Account Owner's Signature Date

2. SECURITY (mandatory)

For security purposes, please indicate your mother's maiden name or select a code name below. This information is mandatory for all account types.

Mother's Maiden Name or Code Name of Primary Account Owner

Mother's Maiden Name or Code Name of Joint Account Owner

3. CHECKING

Please select from one of the following:

- ☐ Personal ☐ Business¹

Your name and address will appear on your checks as they appear on your brokerage account. If you do not wish to have your address printed on your checks, please check the box below.

- ☐ No Address

Check writing activity will be displayed on your account statement. Individual checks are not returned, but photocopies are available upon request. If no box is selected, the personal style checks will be issued.

You may add one additional line of information on your checks (such as your telephone number). Please indicate any additional information you would like to include:

Horizontal line for additional information.

If you would like to receive a debit card, please select the type of account you have:

- ☐ Gold ☐ Platinum

For corporate accounts only: indicate the name of the corporation if you would like that name to appear on the MasterCard® in addition to the cardholder's name.

Horizontal line for corporate name.

Debit cards are not available for Silver accounts.

4. PLATINUM ACCOUNT—NO IRA ANNUAL MAINTENANCE FEE

The annual maintenance fee for an Individual Retirement Account (IRA) in which Pershing LLC is custodian can be waived for individual and joint ProCash Plus Platinum accounts. For a jointly owned ProCash Plus Platinum account, both IRA fees can be waived.

IRA Number:

Form for IRA number with a hyphen separator.

Second IRA Number:

Form for second IRA number with a hyphen separator.

5. REWARDSUITE²

- ☐ RewardSuite: Client loyalty program awarding one point for every \$1 spent with the MasterCard debit card, redeemable for air travel, travel-related gift certificates, gift cards to national dining and retail establishments, or one percent cash back on eligible purchases. Visit www.myrewardsuite.com for additional details.

RewardSuite is available for an additional fee. Please review the Financial Terms card for applicable fees.

¹ Business style checks are available for an additional fee. Please review the Financial Terms card for applicable fees.

² Not available for ProCash Plus Silver accounts.



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6. ACCOUNT AGREEMENT

To open a ProCash Plus account, please read the following section carefully and sign in section 7 to accept the terms.

I hereby request my introducing financial organization to open a brokerage account with Pershing LLC ("Pershing") in the name(s) listed as account holder(s) on this application. I further request J.P. Morgan Chase Bank, N.A. (the "Bank") to issue checks and MasterCard® debit card(s) as indicated on this application. Prior to signing below, I have received and read the ProCash Plus Account Agreement, as currently in effect and as amended from time to time, which governs my ProCash Plus account, and I agree to be bound by such Account Agreement.

Interest on debit balances will be charged and compounded in accordance with the ProCash Plus Account Agreement, as applicable.

New York Stock Exchange Rule 407 prohibits certain account holders from engaging in margin transactions without their employer's prior written consent. Pershing may suspend execution of any trades in my account pending receipt of this consent.

I UNDERSTAND THAT PERSHING WILL GRANT ME MARGIN PRIVILEGES FOR MY PROCASH PLUS GOLD OR PLATINUM ACCOUNT (NOT AVAILABLE AUTOMATICALLY FOR PROCASH PLUS SILVER ACCOUNTS; FURTHER DOCUMENTATION REQUIRED) UNLESS PROHIBITED BY LAW, OR BY MY REQUEST AS INDICATED BY CHECKING THE BOX BELOW.

I do not want margin privileges.

This agreement, with respect to all portions of ProCash Plus, including interest charges on loans Pershing may make to me, will be governed by, and interpreted under, the laws of the State of New York. The terms of my agreement with J.P. Morgan Chase Bank are governed by Ohio law.

By signing this application, the undersigned acknowledges that securities not fully paid for by the undersigned may be loaned to Pershing or loaned out by Pershing to others.

By signing this application, you accept the terms of the enclosed Account Agreement and RewardSuite program rules where applicable. Please be sure that all account owners sign this application.

I AGREE THAT THIS PROCASH PLUS ACCOUNT AGREEMENT CONTAINS A PREDISPUTE ARBITRATION CLAUSE, WHICH IS LOCATED IN PARAGRAPHS 30 AND 31 IN THE AGREEMENT. I ACKNOWLEDGE RECEIVING A COPY OF THIS AGREEMENT.

7. ACCOUNT OWNER(S) SIGNATURE(S) *(please provide all account owners' signatures)*

SIGN HERE:

Primary Account Owner's Signature Date

Check this box if you do not want a debit card

SIGN HERE:

Joint Account Owner's Signature (if applicable) Date

Check this box if you do not want a debit card

SIGN HERE:

Additional Account Owner's Signature (if applicable) Date

Check this box if you do not want a debit card

SIGN HERE:

Additional Account Owner's Signature (if applicable) Date

Check this box if you do not want a debit card

8. ADDITIONAL SIGNATORIES *(for check writing only)*

If you have an individual or joint account and would like to add other signatories (for individuals who are not listed on the account registration), please have the additional signatories sign below.

1.

Sign Here

Date

2.

Sign Here

Date

The primary account owner authorizes the additional signatories on this application by signing below.

Primary Account Owner's Signature (if applicable)

Date

INTRODUCING FINANCIAL ORGANIZATION ONLY

To be approved by an authorized person at the introducing financial organization.

The undersigned organization guarantees that the signature(s) on this application is/are that of the account holder(s) or is/are authorized by the account holder(s). We have reviewed and approved the above listed account and determined, where applicable, that the account is suitable for margin trading.

Introducing Financial Organization

Name (please print)

Title

Signature

Date

Account Number (for office use only)

9. ADDITIONAL DOCUMENTATION

Contact your investment professional or financial organization for additional documents that may be required. Certain restrictions may apply.

Trademark(s) of Pershing Investments LLC. MasterCard® belongs to its respective owner.