

## MEMX Exchange Data Order Form and System Description

Initial Form   
  Amended Form   
  Add/Remove Data Feed Subscription

DATA RECIPIENT INFORMATION		
Company Name:	Date:	
Address of Principal Office:		
City:	State:	Zip Code:
BILLING ADDRESS		
Address of Billing Office:		
City:	State:	Zip Code:
Preferred Billing Method: <input type="checkbox"/> DTCC Direct Debit <input type="checkbox"/> OCC Direct Debit <input type="checkbox"/> ACH Direct Debit <input type="checkbox"/> Invoice		
BUSINESS CONTACT	BILLING CONTACT	
Name:	Name:	
Title:	Title:	
Email:	Email:	
Phone:	Phone:	
MARKET DATA ADMINISTRATOR	TECHNICAL CONTACT	
Name:	Name:	
Title:	Title:	
Email:	Email:	
Phone:	Phone:	

CONNECTIVITY – Section A
Data Center Location: <input type="checkbox"/> Primary – Secaucus (NY4)
Connection Type: <input type="checkbox"/> New <input type="checkbox"/> Existing <input type="checkbox"/> Direct Connection (Proximity – Colocation Cross Connect) <input type="checkbox"/> Direct Telco Connection <input type="checkbox"/> Circuit Provider: _____ <input type="checkbox"/> Extranet Service Provider: _____
CONNECTIVITY – Section B
Data Center Location: <input type="checkbox"/> Secondary – Chicago (CH1)
Subscription Type: <input type="checkbox"/> New <input type="checkbox"/> Existing <input type="checkbox"/> Direct Connection (Proximity – Colocation Cross Connect) <input type="checkbox"/> Direct Telco Connection <input type="checkbox"/> Circuit Provider: _____ <input type="checkbox"/> Extranet Service Provider: _____
Please identify all Vendors through which you will receive MEMX Exchange Data: _____

### DATA FEED SUBSCRIPTION / CHANGE REQUEST

Please select license and products required. For each license and product please confirm use case where relevant. User counts not necessary at this time, as they will be reported monthly.

	License	MEMOIR Data Feed	Invoice Code	Add	Remove	Subscriber Use Case	Invoice Code	Select	Additional Notes
MEMX Equities	Internal Distributor	Top	MD201	<input type="checkbox"/>	<input type="checkbox"/>	License covers all internal use cases			
		Last	MD301	<input type="checkbox"/>	<input type="checkbox"/>	License covers all internal use cases			
		Depth	MD101	<input type="checkbox"/>	<input type="checkbox"/>	Display users	MD101P MD101N	<input type="checkbox"/>	Monthly attestations of pro/non-pro required
						Non-Display	MD103	<input type="checkbox"/>	Non-display usage excluding trading platforms*
						Non-Display Trading	MD104	<input type="checkbox"/>	Non-display usage for trading platforms*
	External Distributor	Top	MD202	<input type="checkbox"/>	<input type="checkbox"/>	Display users	MD202P MD202N	<input type="checkbox"/>	Monthly attestations of pro/non-pro required
						Or Enterprise	MD205	<input type="checkbox"/>	Unlimited users
						Or Digital Media	MD206	<input type="checkbox"/>	Unlimited users if policy requirements are met
		Last	MD302	<input type="checkbox"/>	<input type="checkbox"/>	Display users	MD302P MD302N	<input type="checkbox"/>	Monthly attestations of pro/non-pro required
						Or Enterprise	MD305	<input type="checkbox"/>	Unlimited users
						Or Digital Media	MD306	<input type="checkbox"/>	Unlimited users if policy requirements are met
		Depth	MD102	<input type="checkbox"/>	<input type="checkbox"/>	Display users	MD102P MD102N	<input type="checkbox"/>	Monthly attestations of pro/non-pro required
						Digital Media	MD106	<input type="checkbox"/>	Unlimited users if policy requirements are met
		If Externally Distributing	Controlled					<input type="checkbox"/>	Subscriber has full entitlement controls and can report all users
	Uncontrolled						<input type="checkbox"/>	Subscriber distributes to third parties and reports third parties per the MEMX Data Policies	
MEMX Options	Internal or External Distributor	Top	MD401	<input type="checkbox"/>	<input type="checkbox"/>	License covers all use cases			
		Depth	MD501	<input type="checkbox"/>	<input type="checkbox"/>	License covers all use cases			

\*Non-Display Usage fees will apply for Data Recipients that use MEMOIR Equities Depth Exchange Data for one or both of the following categories of Non-Display Usage: (i) Non-Display Usage by Trading Platforms; and (ii) Non-Display Usage not by Trading Platforms. Non-Display Usage by Trading Platforms includes use of Exchange Data in an execution platform operated as or by a registered National Securities Exchange (as defined in Section 3(a)(1) of the Exchange Act), an Alternative Trading System (as defined in Rule 300(a) of Regulation ATS), or an Electronic Communications Network (as defined in Rule 600(b)(23) of Regulation NMS). Non-Display Usage not by Trading Platforms includes trading uses such as high frequency or algorithmic trading as well as any trading in any asset class, automated order or quote generation and/or order pegging, price referencing for smart order routing, operations control programs, investment analysis, order verification and management, surveillance programs, risk management, compliance, and portfolio management.

For Reference: [MEMX Market Data Policies](#)

**SYSTEM DESCRIPTION**

Please provide a complete description of any/all applicable Systems that make use of MEMX Exchange Data, including the System name(s).

Name/Version of System that makes use of MEMX Exchange Data: \_\_\_\_\_

Name/Version of Entitlement System used to control access: \_\_\_\_\_

Please provide descriptions of any/all Systems that make use of MEMX Exchange Data, and applicable Entitlement System(s):

**AFFILIATE DISTRIBUTION**

**Affiliates:** Will your organization distribute MEMX Exchange Data to Affiliates\*?  Yes  No  
If yes, please complete the MEMX List of Affiliates form.

\***Affiliate** shall include any entity that, from time to time, directly or indirectly controls, is controlled by, or is under common control with such party, where control means the power to direct or cause the direction of the management of policies of another entity, whether through the ownership of voting securities, by contract, or otherwise.

I certify that the information provided above is accurate.

\_\_\_\_\_  
Signature of Data Recipient Authorized Representative

\_\_\_\_\_  
Title

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

## MEMX Exchange Data Order Form and System Description – Data Feed Subscriber Information Addendum

DATA FEED SUBSCRIBER INFORMATION		
Company Name:	Date:	
Address of Principal Office:		
City:	State:	Zip Code:
BUSINESS CONTACT	TECHNICAL CONTACT	
Name:	Name:	
Title:	Title:	
Email:	Email:	
Phone:	Phone:	
DATA FEED SUBSCRIBER INFORMATION		
Company Name:	Date:	
Address of Principal Office:		
City:	State:	Zip Code:
BUSINESS CONTACT	TECHNICAL CONTACT	
Name:	Name:	
Title:	Title:	
Email:	Email:	
Phone:	Phone:	
DATA FEED SUBSCRIBER INFORMATION		
Company Name:	Date:	
Address of Principal Office:		
City:	State:	Zip Code:
BUSINESS CONTACT	TECHNICAL CONTACT	
Name:	Name:	
Title:	Title:	
Email:	Email:	
Phone:	Phone:	
DATA FEED SUBSCRIBER INFORMATION		
Company Name:	Date:	
Address of Principal Office:		
City:	State:	Zip Code:
BUSINESS CONTACT	TECHNICAL CONTACT	
Name:	Name:	
Title:	Title:	
Email:	Email:	
Phone:	Phone:	