Cboe Options Exchange On-Floor Lead Market-Maker (LMM) Appointment Application

I. APPL	ICANT DATA				
Name of Member Organization:					
Address:					
City:	State:	Zip:			
Phone:					
TYPE OF ORGANIZATION					
☐ Corporation ☐ Limited Liability Company	☐ Partnership ☐ Other				
II DESIGNE	EE INFORMATION				
Information concerning individuals who will act on behandled for all LMM designees.		nformation must be			
DESIGNEE #1	DESIG	NEE #2			
Name/ACR:	Name/ACR:				
Address:	Address:				
Email:	Email:				
Office Phone:	Office Phone:				
Mobile/Pit Phone:	Mobile/Pit Phone:				
DESIGNEE #3	DESIG	NEE #4			
Name/ACR:	Name/ACR:				
Address:	Address:				
Email:	Email:				
Office Phone:	Office Phone:				
Mobile/Pit Phone:	Mobile/Pit Phone:				
DESIGNEE #5	DESIG	NEE #6			
Name/ACR:	Name/ACR:				
Address:	Address:				
Email:	Email:				
Office Phone:	Office Phone:				
Mobile/Pit Phone:	Mohile/Pit Phone:				

III. APPLICANT INFORMATION							
Identify the owners, partners, members and designees of the applicant LMM member organization as follows:							
Names of Owners,					Intends	to act as	
Partners, Members,		\$ Capital	o/ = 50			MM	
Designees	Title or Status	Contribution	% Profit	% Loss	YES	NO	
		IV ADDITIONAL	INFORMATION				
IV. ADDITIONAL INFORMATION A. Please list those owners, partners, members and designees of this LMM applicant organization who are affiliated in any way with another LMM organization. Include the extent of the affiliation, including amounts of capital							
contributions, % profi	ts, % losses, voting	rights etc.					
B. Describe in detail,	the proposed day-t	o-day operation of	the LMM station. I	nclude informatio	n such as:	Who will	
be the LMM designees at the station; how many hours/days/months will these people be employed at the station;							
describe the autonomy of each designee who will man the station; how many clerks will continuously support the							
operation etc.							

C. Note any disciplinary or remedial action taken against any individual or organization named in this application other than action taken pursuant to an SRO minor rule violation plan. If any disciplinary or remedial action has been taken, describe in detail the circumstances surrounding each action and identify the issuing SRO or governmental agency. Also note and describe any warnings issued to any individual or organization named in this application related to a capital or operational problem, rules of trading procedure or evaluation of market quality and identify the issuing SRO or Governmental agency.
V. TRADING HISTORY
V. HADINOHISTORI
Describe, in detail, all industry experience as well as the relevant trading experience of each designee named in this application. Include all experience as a floor broker, market-maker or proprietary (firm) trader. Where applicable, a resume may accompany the application.
DESIGNEE # 1
DESIGNEE # 2
DESIGNEE # 3
DESIGNEE # 4

DESIGNEE # 5				
DESIGNEE # 6				
DESIGNEE # 0				
VI. MARKET SERVICE				
Describe the efforts which are proposed by the applicant to provide the highest quality service to member				
organizations conducting business at Cboe Options. Responses should be specific with respect to willingness to				
participate in marketing efforts, maintaining competitive markets, competing with other marketplaces, and				
promoting Cboe Options as the marketplace of choice.				
VII. MARKET QUALITY				
Describe the level of market quality which the applicant proposes to maintain. Specifically, note commitments to				
bid-ask spread differentials, firmness, size and depth of markets.				

VIII. OPERATIONAL CONSIDERATIONS			
A. Describe the level of staffing which the applicant intends to have available.			
B. Describe the arrangements which have been made to assure that the LMM station is continuously operated by			
approved and experienced LMM designees.			
IX. CAPITAL			
Note the financial resources that the LMM Applicant proposes to commit. Provide details such as: The specific			
dollar amount; the name(s) of the source(s); whether or not the source(s) has any management responsibility or			
participates in the profits/losses of the operation and to what extent the source(s) participates in management			
and/or profits/losses. If the money is borrowed, note the repayment schedule. Provide any other related			
information that should be considered by the Exchange.			

X. MISCELLANEOUS				
Note any additional information which the applicant deems pertine	nt to this application.			
AUTHORIZATION				
I have carefully read the questions contained on this application and the responses that have been provided to those questions. On behalf of the LMM applicant organization, I represent that the responses provided and any other information provided to Cboe Options on behalf of the LMM applicant organization in connection with this application is current, accurate, and complete.				
Authorized Principal:	Title:			
Signature of Authorized Principal:	Date:			