



ACCOUNT APPLICATION: PARTNER INFORMATION

Please type or print legibly in ink. All questions must be answered.)

Each General Partner in a GP must complete this form.

Partnership Name

Last Name

First Name

MI

Date of Birth (MM/DD/YYYY)

Tax ID

Identification
(check which you will provide)

Driver's License

Passport (Required for non-US Citizens)

Government ID

Number on ID

Enter Issuing Country for Passports and State for other ID types

CONTACT & EMPLOYER INFORMATION

Preferred Phone

Alternate Phone

Preferred Email

Alternate Email

Residence Address (no P.O. Boxes)

Mailing Address (if different from Residence)

Street

Street

City

State

City

State

Postal Code/Zip+4

Country

Postal Code/Zip+4

Country

Employer Information Retired (please complete * info for prior employment) Self Employed (please indicate nature of business)

Position*

Employer Name*

Nature of Business*

Street

City

State

Country

Postal Code/Zip+4

Is your employer .. a financial services firm a futures/securities exchange a member of an exchange

National Futures Assoc R.J. O'Brien?

FINANCIAL INFORMATION (in USD)

Annual Income

Net Worth (exclusive of primary home)

Liquid Net Worth

Current Futures/Commodities Brokerage Information

Current Securities Brokerage Information

Brokerage Name

Account Open?
(Circle one.)

Yes No

Brokerage Name

Account Open?
(Circle one.)

Yes No

INVESTMENT EXPERIENCE

Yes No

Do you have experience trading futures/commodities? If yes, ____ years

Do you have experience trading stocks/bonds? If yes, ____ years

Do you understand the basics of futures trading?

Do you understand the risks of loss and the possibility of incurring a debit?

Do you understand RJO's Margin Policy? (Account Agreement, Section 3)

Is futures trading suitable for you?

Partner Signature

Date

This form can be returned directly to: newaccountdocs@rjobrien.com