



# CHICAGO MERCANTILE EXCHANGE INC.

## Rule 106.D. Futures Industry Transfer

**CME      IMM      IOM      GEM**

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### INDIVIDUALLY OWNED MEMBERSHIP INTEREST

The undersigned transferor and transferee have read and understand the provisions of Rule 106 regarding transfers in general, and Rule 106.D. regarding the Futures Industry Transfer in particular, and agree to abide by the provisions contained in these rules. Please note that for purposes of Rule 110, the lessee of the membership interest will be considered the owner, and any valid claim filed against the lessee will be considered filed against the membership interest.

#### TRANSFEROR (Owner of Record):

Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

#### TRANSFeree:

Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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### MEMBER FIRM OWNED MEMBERSHIP INTEREST

TRANSFEROR (Employee and/or Officer):

\_\_\_\_\_  
Name (Please Print)

OWNER OF RECORD:

\_\_\_\_\_  
Member Firm Name (Please Print)

\_\_\_\_\_  
Officer Signature

TRANSFeree:

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Rule 106.D. Trading Authorization**

**CME            IMM            IOM            GEM**

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**INDIVIDUALLY OWNED MEMBERSHIP INTEREST**

**TO BE COMPLETED AND SIGNED BY OWNER**

Pursuant to Rule 106.D.7., I \_\_\_\_\_  
(Transferor)

hereby grant authorization to \_\_\_\_\_  
(Transferee)

to clear transactions on the books of \_\_\_\_\_  
(Clearing Firm)

Transferor's signature \_\_\_\_\_

Date \_\_\_\_\_

Pursuant to Rule 106.D.7., the transferor must approve any change in the transferee's clearing firm in order to remain qualified to trade. The authorization will transfer to any successor of the clearing firm.

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**MEMBER FIRM OWNED MEMBERSHIP INTEREST**

**TO BE COMPLETED AND SIGNED BY OFFICER OF CLEARING FIRM**

Pursuant to Rule 106.D.8., \_\_\_\_\_  
(Member Firm)

hereby grant authorization to \_\_\_\_\_  
(Transferee)

to clear transactions on the books of \_\_\_\_\_  
(Clearing Firm)

\_\_\_\_\_  
Signature of Officer

\_\_\_\_\_  
Clearing Firm

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date