



Non-Cash Collateral #

Request No.	Movement Type	Collateral Accounts involved *	International Securities Identification Number ("ISIN code")	Quantity (in face value)	Value Date
1	<input type="checkbox"/> Deposit <input type="checkbox"/> Withdrawal <input type="checkbox"/> Porting	From: <u>HOUSE ACCOUNT</u> To: _____			
2	<input type="checkbox"/> Deposit <input type="checkbox"/> Withdrawal <input type="checkbox"/> Porting	From: <u>HOUSE ACCOUNT</u> To: _____			
3	<input type="checkbox"/> Deposit <input type="checkbox"/> Withdrawal <input type="checkbox"/> Porting	From: <u>HOUSE ACCOUNT</u> To: _____			

\* To fill in this column only when Porting is selected as the Movement Type  
 # fees will be charged based on Appendix I of the OTC Clear Procedures

\_\_\_\_\_  
 Authorized Signature(s) and Company Chop

\_\_\_\_\_  
 Date

(Name of Signatories: \_\_\_\_\_ )

For Office Use Only		
Verified by:	Approved by:	Checked by:
Date:	Date:	Date: