

TERMINATION OF EXCHANGE TRADER AUTHORIZATION

Member Firm: **Participant ID**

Name of the Exchange Trader:

Date of birth:

The authorization shall be terminated from (date):

The termination shall apply either to trading on:

All markets Trader has been authorized by Member Firm to trade on

or to trading on the following markets:

Equity market

Fixed income market

Derivatives market

.....
Date

.....
Authorized Signature

.....
Name in print

Contact person for the de-registration

Contact person's E-mail

Please submit this form to Member Services via fax on + 46 8 405 6890 or by e-mail to memberservices@nasdaqomx.com

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