

Early Adopter Program Indication of Interest

1. Name of US FCM Entity: _____
2. Contact Name: _____
3. Contact Title: _____
4. Contact Email: _____
5. Contact Phone #: _____
6. Name of FCM Officer Making Attestations: _____

The undersigned attests that the FCM will meet the below criteria:

7. The FCM reasonably expects to be ready to offer execution services on FMX and clearing services at LCH to customers by the FMX Intended Launch Date of September 3, 2024

Yes No
8. The FCM reasonably expects to fund the LCH Listed Rates Default Fund of up to 3.4m GBP by the Intended Launch Date of September 3, 2024

Yes No

Name of FCM

Signature of Officer

Print Officer's Name and Title

The Indication of Interest must be submitted to FuturesSales@FMX.com by April 5, 2024, to be considered for the program.