

ISA Porting Requirements Declaration

Eurex Clearing AG
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Replacement Clearing Member

* Company Name	
* Address 1	* Street no.
* Address 2	
* Postal code	* Town/city
* Country	

Declarations on the fulfilment of certain Porting Requirements – ISA

Dear Sir/Madam,

it is our intention to act as Replacement Clearing Member pursuant to Chapter I Part 4 Number 10.4 of the Clearing Conditions of Eurex Clearing AG (the "**Clearing Conditions**") for each of the following Disclosed Direct Clients (each a "**Relevant Disclosed Direct Client**") of _____ (Member ID: _____) (the "**Transferor Clearing Member**"):

_____ (Member ID (if any) of Disclosed Direct Client:
_____ resp. transaction account no.: _____)

_____ (Member ID (if any) of Disclosed Direct Client:
_____ resp. transaction account no.: _____)

...

Capitalised terms used in this declaration but not defined herein have the same meaning given to them in the Clearing Conditions.

Declarations

We hereby make the following declarations to fulfil the following Porting Requirements:

1. Confirmation pursuant to Chapter I Part 4 Number 10.4 (B) of the Clearing Conditions

We confirm to Eurex Clearing AG that each Relevant Disclosed Direct Client has designated, and has taken all necessary steps to allow, us to act as its future Clearing Member in respect of the ISA Transactions under the ISA Standard Agreement established between Eurex Clearing AG and the Transferor Clearing Member with respect to such Relevant Disclosed Direct Client (each a "**Relevant ISA Standard Agreement**").

2. Declaration pursuant to Chapter I Part 4 Number 10.4 (C) of the Clearing Conditions

We further undertake to Eurex Clearing AG that, immediately following the Transfer, we will provide Eurex Clearing AG with sufficient Eligible Margin Assets to cover any shortfall in Margin and Variation Margin in respect of all ISA Transactions under each Relevant ISA

Standard Agreement (or, if following such Transfer, the ISA Transactions shall constitute Omnibus Transactions, any shortfall in Omnibus Margin and Omnibus Variation Margin).

Name of Replacement Clearing Member

Signature

Signature

Place / Date

Place / Date

Name

Name

Function

Function