



End of Day Billing Form

Please email the completed form to Subscriber@nasdaqomx.com or fax to +1 212 231 5426

A NASDAQ OMX PHLX LLC ("PHLX" OR "EXCHANGE") MEMBER OR MEMBER ORGANIZATION OR A NASDAQ OPTIONS MARKET PARTICIPANT ("NOM" OR "EXCHANGE") MAY REQUEST ACCESS TO THEIR RESPECTIVE END OF DAY OPTIONS BILLING FILE VIA THE NASDAQ OMX SECURE SERVER BY COMPLETING THE BELOW FORM. AN OFFICER OF THE MEMBER, MEMBER ORGANIZATION OR PARTICIPANT, RESPECTIVELY, MUST EXECUTE THE BELOW FORM AND SUBMIT THE FORM AS DESCRIBED HEREIN. PLEASE NOTE THAT IT IS THE MEMBER'S/MEMBER ORGANIZATION'S/PARTICIPANT'S RESPONSIBILITY TO NOTIFY THE EXCHANGE IN A TIMELY MANNER IF ANY INFORMATION PROVIDED BELOW CHANGES.

Section A

APPLICATION AND SERVICE INFORMATION (To be completed by the Requestor)

Firm Name: _____

NASDAQ OMX PHLX Option Account Number(s): _____

NASDAQ OMX Option Account Number(s): _____

Section B

Select Exchange

NOM PHLX

Section C

COMPANY AUTHORIZATION (This section must be completed by an Officer of the Member, Member Organization or Participant)

Officer Name: _____

Phone: _____

Officer Title: _____

Fax: _____

Signature: _____

Date: _____

Email: _____

Waiver of claim

The information provided by NASDAQ OMX in your billing file contains current month estimates that may not accurately reflect your final month-end actual billing charges. This current-month information is being provided to you as a tool to assist you in gauging your monthly transaction costs. While NASDAQ OMX believes the numbers contained in the file are reasonable estimates, these numbers may differ from your actual charges. Please note that your paper invoice and the information on MyNasdaqOMX.com will reflect actual billing charges. NASDAQ OMX is not responsible for any errors or omissions in any of information provided in the billing file.

INTERNAL USE ONLY:

Completed by Subscriber Services: _____