

ACCOUNT INFORMATION - GENERAL INFORMATION
ACCOUNT SETUP

You must indicate an account type (either individual or joint). Types of ownership are governed by the laws of your state of residence. If you need information about which are appropriate in your state, please consult your state tax officials or your tax advisor.

Account Types

- | | | | | |
|--|---|--|---|---|
| <input type="checkbox"/> Individual | Joint:
<input type="checkbox"/> Tenants with Right of Survivorship
<input type="checkbox"/> Tenants in Common
<input type="checkbox"/> Tenants by the Entirety
<input type="checkbox"/> Community Property | Transfer on Death¹ :
<input type="checkbox"/> TOD - Individual
<input type="checkbox"/> TOD - Joint Tenants with Right of Survivorship
<input type="checkbox"/> TOD - Tenants by the Entirety | Custodial:
<input type="checkbox"/> Uniform Gift to Minors Act Account
<input type="checkbox"/> Uniform Transfer to Minors Act Account | Retirement Non Vision Custodian²:
<input type="checkbox"/> Individual Retirement Account |
|--|---|--|---|---|

¹ Eligible for individual and joint accounts.

² A retirement account with a non-Vision custodian is one in which the customer chooses a custodian other than that currently provided by Vision. Such custodian will handle the administration, record keeping and reporting services, with Vision handling only the investments.

If your account will be a Deliver vs. Payment or a Receive vs. Payment account, please check this box:

OPTIONAL FEATURES

You must qualify to add these features to your account. Additional applications are required.

Indicate any features in this section that you would like to request. Consult your Financial Advisor or Vision's Client Services team for availability and eligibility, and to obtain the appropriate additional application(s) to apply for the features(s) you want.

Account Features:

-
- Margin
-
-
- Options
-
-
- Cash Management*

*Vision's Cash Management Program provides a money market sweep and direct deposit.

ACCOUNT NAME

Provide personal information on the primary individual associated with this account (such as the primary owner, authorized individual, minor for a custodial account, or IRA custodian if other than that provided by Vision) and information for each additional account holder (such as a joint holder, authorized individual, custodian for a minor's custodial account, or beneficial owner for an IRA with a custodian other than that provided by Vision). Attach additional sheets if necessary.

PRIMARY ACCOUNT HOLDER

Last Name	First Name	MI
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 Residence Address (Street Address - No PO Boxes Allowed)

 City, State, Zip, Country
 Please check here if you have been at your current home address for less than one year.
 Address for account statements, if different from above

 Street Address

 City, State, Zip, Country

ADDITIONAL ACCOUNT HOLDER

Last Name	First Name	MI
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 Residence Address (Street Address - No PO Boxes Allowed)

 City, State, Zip, Country
 Address for account statements, if different from above

 Street Address

 City, State, Zip, Country

PERSONAL INFORMATION FOR PRIMARY ACCOUNT HOLDER

Business Telephone	Home Telephone
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Cell Phone Fax	
<hr/>	
Social Security Number (if applicable)	
<hr/>	
Date of Birth (MM/DD/YYYY)	

Mother's Maiden Name
<hr/>
Primary E-mail Address (for delivery of statements and confirmations, if elected)
<hr/>
Secondary E-mail Address
<hr/>
Marital Status

FINDER'S FEE DISCLOSURE STATEMENT

Account Number:	7	4	0	0				
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The purpose of this Disclosure Statement is to comply with the requirements of FINRA Rule 2040,(c)(4), and to inform you, _____
 _____ ("Client") That _____ ("Finder")
 currently serves as an unaffiliated Finder for Fenix Securities LLC, (FENIX), a registered Broker Dealer under FINRA.

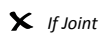
Client hereby acknowledges receiving and understanding the following disclosures provided by Fenix:

- Finder and FENIX have entered into a written agreement whereby Finder will use its best efforts to solicit and refer as clients to FENIX those individuals or entities that it believes to be suitable and appropriate for the services provided by FENIX, in exchange for cash commissions to be paid to Finder by FENIX.
- FENIX will pay Finder _____ % of the commission fees paid per annum by Client to FENIX.
- FENIX will not charge Client any additional fees as a result of its agreement with Finder. The fees that FENIX will charge Client for commissions are the same as what it would customarily charge any new client who was not referred by Finder.
- Finder may make periodic contacts with Client as necessary to assist Client in understanding FENIX's services and/or obtain additional information from Client on behalf of FENIX.
- Finder is an independent contractor, and is not an affiliate, agent, representative, partner or employee of FENIX.
- Finder is not authorized to and will not provide investment advice or manage Investments on behalf of FENIX.
- Finder does not have authority to accept a client agreement on behalf of FENIX or to collect or receive payment in its own name for any of FENIX's services.

Acknowledgment of Receipt of Disclosures and Documents:

By signing below, Client acknowledges receiving this Finder's Fee Disclosure Statement, with all disclosures recited above. Client also acknowledges that by signing this finder's Fee Disclosure Statement, it is not entering into any relationship with Finder for advisory or brokerage services. Such services are only available pursuant to a separate agreement with Finder


(Signature)
Print Name _____
Title _____
Date _____


(Signature)
Print Name _____
<i>(Second Party, if Joint Account)</i>
Date _____