

J.P. Morgan Account Derivatives Approval Form with a New Account

J.P.Morgan

A. Investment Experience

Please indicate investment experience below:

	# of Years Traded	* Frequency of Trades	Avg Size of Trades	* Types of Trades
Options	20	<input checked="" type="checkbox"/> day <input type="checkbox"/> week <input type="checkbox"/> month <input type="checkbox"/> year	\$ 1 mil +	<input type="checkbox"/> cash <input type="checkbox"/> margin <input type="checkbox"/> short <input type="checkbox"/> long
Stocks	20	<input checked="" type="checkbox"/> day <input type="checkbox"/> week <input type="checkbox"/> month <input type="checkbox"/> year	\$ 1 mil +	<input type="checkbox"/> cash <input type="checkbox"/> margin <input type="checkbox"/> short <input type="checkbox"/> long
Bonds	20	<input checked="" type="checkbox"/> day <input type="checkbox"/> week <input type="checkbox"/> month <input type="checkbox"/> year	\$ 1 mil +	<input type="checkbox"/> cash <input type="checkbox"/> margin <input type="checkbox"/> short <input type="checkbox"/> long
FX	20	<input type="checkbox"/> day <input type="checkbox"/> week <input type="checkbox"/> month <input type="checkbox"/> year	\$ 1 mil +	<input type="checkbox"/> cash <input type="checkbox"/> margin <input type="checkbox"/> short <input type="checkbox"/> long
Commodities	20	<input checked="" type="checkbox"/> day <input type="checkbox"/> week <input type="checkbox"/> month <input type="checkbox"/> year	\$ 1 mil +	<input type="checkbox"/> cash <input type="checkbox"/> margin <input type="checkbox"/> short <input type="checkbox"/> long
Hedge Funds/PE	20	<input type="checkbox"/> day <input type="checkbox"/> week <input type="checkbox"/> month <input type="checkbox"/> year	\$ 1 mil +	<input type="checkbox"/> cash <input type="checkbox"/> margin <input type="checkbox"/> short <input type="checkbox"/> long
Other	20	<input checked="" type="checkbox"/> day <input type="checkbox"/> week <input type="checkbox"/> month <input type="checkbox"/> year	\$ 1 mil +	<input type="checkbox"/> cash <input type="checkbox"/> margin <input type="checkbox"/> short <input type="checkbox"/> long

B. Signature(s)

All accountholders are required to sign below:

⇒ [Signature] 2/11/10 DARREN K INDYKE
 Signature (Accountholder) Date Print Name

* ⇒ [Signature] CAROL DE JOUGH
 Signature (Accountholder) Date Print Name

⇒ [Signature] JEANNE BRENNAN
 Signature (Accountholder) Date Print Name

⇒ [Signature]
 Signature (Accountholder) Date Print Name

C. J.P. Morgan Use Only

	Exchange Traded Options Equities	OTC Options OTC Equity	EM	FX	Debt
Level 1: Covered writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Level 2: Buying Options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Level 3: Spreads	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Level 5: Uncovered Writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Level 6: Combinations/Straddles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Publication date of OCC Booklet 02/01/1994. Date OCC Booklet sent to Client 03/01/2010

RR Signature [Signature] Date
 Designated Principal Signature [Signature] Date 3/10/10
 ROP Signature (Exchange Traded Options) [Signature] Date
 ROSPP Signature (Exchange Traded Options Level 5/6) [Signature] Date 3/10/10