

## Collateral Custodial Segregated Account Affirmation Form

To be read in conjunction with the Rulebook: <a href="https://www.lch.com/resources/rulebooks/lch-limited">https://www.lch.com/resources/rulebooks/lch-limited</a>; the Collateral Management System Access Agreement; the LCH Client Charge; the LCH Collateral Management Agreement and the Euroclear Bank Collateral Service Agreement (as amended)

Please complete the form and return to <a href="mailto:collateral.clientservices@lch.com">collateral.clientservices@lch.com</a> Reference (to be completed by LCH) Instruction Reference: ..... Clearing Member Account Identification (to be completed by LCH) Clearing Member (full name): ..... *Mnemonic:* | \_ | \_ | \_ | Sub Account: | \_ | \_ | \_ | Client ID:..... Instruction Details (to be completed by LCH) Giver Account: | \_ | \_ | \_ | \_ | Taker Account: | \_ | \_ | \_ | \_ | Eligibility Set ID: Transaction Reference: Transaction Currency: GBP / USD / EUR Transaction Amount: ..... Affirmation (to be completed by the Clearing Member) We confirm that we (please circle the action you wish to take): **Affirm** the triparty transaction Do not affirm the triparty amount specified above under transaction amount specified above Or "Transaction Amount" under "Transaction Amount" Clearing Member Authorised signature(s) 1. ..... ..... (Signature) (Print Name) (Position) 2. ..... ..... ..... (Signature) (Print Name) (Position) The signature(s) here will be checked against the authorised signatory list held by LCH for the Member. Please provide evidence of signing authority for the Authorised Signatory, including specimen signature if not already provided to LCH.