

DRAFT

**INSTRUCTIONS FOR BATS EXCHANGE, INC.  
SERVICE BUREAU AGREEMENT**

The following agreement authorizes a Service Bureau to route trades on behalf of a Member of BATS Exchange, Inc. If you have any questions regarding this agreement, please contact \_\_\_\_\_ at (\_\_\_\_) \_\_\_\_\_. Once completed, please fax to:

BATS Exchange, Inc.  
Attention: Membership Services  
Fax #: \_\_\_\_\_

Before this agreement can go into affect, the original copy of this agreement must be signed and mailed to the following address:

BATS Exchange, Inc.  
\_\_\_\_\_  
\_\_\_\_\_  
Attn: Membership Services

**BATS EXCHANGE  
SERVICE BUREAU AGREEMENT**

1. This Service Bureau Agreement (this “Agreement”) is between BATS Exchange, Inc. (“Exchange”) the Member of Exchange designated below (“Member”), and the Authorized Service Bureau designated below (“Service Bureau”).
2. This Agreement authorizes the Service Bureau to route orders and any modifications thereto to Exchange on behalf of the Member.
3. By executing this Agreement, the undersigned Member agrees that it is responsible for all orders using its mnemonic entered on the Exchange through or by the Service Bureau. The Member also agrees to accept and honor all trades executed on Exchange as a result of orders routed to Exchange through or by the Service Bureau using the Member’s mnemonic, regardless of whether such orders were provided to Exchange in error by the Service Bureau.
4. The Member understands and agrees that it is its sole responsibility to immediately notify Exchange in the event that it wishes to terminate this Agreement.
5. This Agreement is for the term of one year from the date of execution and shall be automatically renewed on an annual basis unless terminated by any party upon 24 hours written notice.
6. This Agreement shall be governed by the laws of the state of New York without regard to its choice of law provisions.

IN WITNESS THEREOF, THE PARTIES HAVE EXECUTED THIS SERVICE BUREAU AGREEMENT EFFECTIVE AS OF THE DATE SET FORTH BELOW.

**SERVICE BUREAU**

**MEMBER**

**BATS Exchange, Inc.**

\_\_\_\_\_  
*Name of Service Bureau*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Service Bureau Contact*

\_\_\_\_\_  
*Print Name*

\_\_\_\_\_  
*Print Name*

\_\_\_\_\_  
*Phone Number of Contact  
Person*

\_\_\_\_\_  
*Title (must be officer)*

\_\_\_\_\_  
*Title*

\_\_\_\_\_

\_\_\_\_\_  
*Name of Firm*

\_\_\_\_\_  
*Date*

\_\_\_\_\_

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*MPID of Member*