

Form SC1 Opening / Maintaining a Safe Keeping Account.

(Financial Regulator, Client Asset Requirements 16.3.1)

You are required to complete and sign this letter and return it to our office. By signing this form, you accept our Terms of Business which outline the operation of our safekeeping account with our Custodians and our Nominee Account.

I /we hereby authorise Campbell O'Connor & Co to operate a safekeeping account on my/our behalf.

I /we understand the terms of the account to be those seen and understood by me/us, subject to variation from time to time.

I/we understand that the account will be operated under the rules of the Financial Regulator.

Name (1) _____
 Address 1 _____
 Address 2 _____
 Address 3 _____
 Address 4 _____
 Address 5 _____
 Telephone _____
 E-mail _____
 Signature _____
 Date _____

Name (2) _____
 Address 1 _____
 Address 2 _____
 Address 3 _____
 Address 4 _____
 Address 5 _____
 Telephone _____
 E-mail _____
 Signature _____
 Date _____

Name (3) _____
 Address 1 _____
 Address 2 _____
 Address 3 _____
 Address 4 _____
 Address 5 _____
 Telephone _____
 E-mail _____
 Signature _____
 Date _____

Name (4) _____
 Address 1 _____
 Address 2 _____
 Address 3 _____
 Address 4 _____
 Address 5 _____
 Telephone _____
 E-mail _____
 Signature _____
 Date _____

Nomination Section for a Safe Keeping Account

I/We also hereby authorise the following individuals the right to transmit orders, cash instructions, and stock movements over my/our account;

Person 1
 Name _____
 Signature _____
 Limitations (if any) _____

Person 2
 Name _____
 Signature _____
 Limitations (if any) _____

Person 3
 Name _____
 Signature _____
 Limitations (if any) _____

Person 4
 Name _____
 Signature _____
 Limitations (if any) _____