

DVP/RVP Account Statement Delivery Suppression Request Instructions

Complete all sections according to the instructions below. Please print or type all information.

The form must provide details of your **Broker-Dealer Name** and **Broker-Dealer Number**.

STEP 1. ACCOUNT/CLIENT INFORMATION

Select **Single Account Request** option to suppress statement for a specific DVP/RVP account.

- Account Title and Account Number must be completed if the Single Account Request option is selected.

Select **All Accounts Request** option to suppress statements for all DVP/RVP accounts associated to an Institutional Client.

- Institution Name must be completed if this option is selected.
- If the Institutional Client listed on the form is an OMGEO ALERT user, OMGEO Alert Acronym can be provided (optional field).

STEP 2. STATEMENT SUPPRESSION - CLIENT SIGNATURE

Obtain appropriate authorized signature. Print name, sign and date.

STEP 3. RETURN THE COMPLETED FORM

After DVP/RVP Account Statement Delivery Suppression Request form is completed, the form must be submitted for processing:

- For **Single Account Request** option (single DVP/RVP account), upload the form in Imaged Documents via NetX360>Accounts>Single Account>Documents>Imaged Documents.
- For **All Account Request** option, send the form via e-mail referencing all the account numbers associated with the specified Institution Name. E-mail address: DM@albridge.com. Statement suppression request will only be applied to list of accounts provided. If additional accounts are added later this process will need to be repeated.
Note: Account List can be retrieved using NetX360 Report Center>Report Builder functionality.
- For **All Account Request** option for firms using the Institutional Client feature in NetX360's Relationship Profile Manager (RPM), the form must be uploaded to the Institutional Client's primary account via NetX360>Accounts>Single Account>Documents>Imaged Documents. Primary account information can be found in NetX360>Admin>Relationship Profile Manager under the Additional Info section for the Institutional Client record. The suppression request will then automatically apply to current and future RVP/DVP accounts linked to the specified Institutional Client.

DVP/RVP Account Statement Delivery Suppression Request

Pursuant to FINRA Rule 2231, complete this form to request and consent to suppression of the delivery of account statements. This request will apply to paper and electronic delivery of statements. In order to take effect for the current quarter, this completed form must be received by Pershing no later than the last business day of the current quarter.

If the account shows security or money positions at the end of any quarter during the suppression period (except for positions of a temporary nature, such as from fails to receive or deliver, errors, questioned trades, dividend or bond interest entries and other similar transactions) an account statement will be delivered for that quarter. Upon request, you will be provided with copies of any particular account statement(s) generated during the delivery suppression period. You may reinstate the delivery of account statements by completing the DVP/RVP Account Statement Delivery Suppression Cancellation form.

Broker-Dealer Name	Broker-Dealer Number
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STEP 1. ACCOUNT/CLIENT INFORMATION

Request Type

Please select one option.

Single Account Request

Account Title	Account Number (9 characters)
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All Accounts Request

Institution Name	OMGEO Alert Acronym (8 characters)
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STEP 2. STATEMENT SUPPRESSION

I hereby request suppression of the delivery of account statements for the above-referenced account(s). By signing below, I hereby make the following representations and warranties:

- The account(s) are used solely for the purpose of execution on a DVP/RVP basis.
- (If account request selected) I have the authority to act on behalf of the account(s) indicated above inclusive of the authority to consent to the suppression of account statements.
- (If client request selected) I have the authority to act on behalf of the Institution and Institution's ALERT acronym indicated above inclusive of the authority to consent to the suppression of account statements.

Client Signature

Print Name	Date
Signature X	

