

Solium

FINANCIAL

A division of Solium Capital Inc.

(also referred to as the "Firm")

Waiver of Client Confidentiality

NOTE: *This form is applicable to the following:*

- U.S. person, as defined by the Internal Revenue Service (IRS)
- Beneficiary of a flow-through entity, such as a trust, estate or partnership as defined by the IRS
- Signing officer of a flow-through entity, such as a trust, estate or partnership as defined by the IRS

Solium Financial Trading Account Number _____

Name of account holder(s) _____

To: Solium Financial ("Solium")

I hereby agree that the release of any information by Solium to the Internal Revenue Service ("IRS") or any of its agents, in connection with the requirements and regulations established by the IRS, shall not be considered a breach of any duty of confidentiality owed to me by Solium. I hereby acknowledge and consent to the disclosure to the IRS or any of its agents by Solium of any oral or written information concerning income, tax withholding, tax information and related material with respect to all sources of income received by me/us in my/our Solium Financial trading account(s).

I have also provided to Solium a W-9, or W-8IMY/W-8BEN in compliance with IRS reporting requirements.

Account Holder Signature _____

Date _____

Joint Account Holder Signature _____

Date _____