



BOX Options Exchange Form 1

Exhibit F-7 – BOX Trading Participant Clearing Guarantee (Market Maker)

Return to: BOX Options Exchange LLC (the “Exchange”)
 Attn: Options Participant Registration Department
 101 Arch Street, Suite 610
 Boston, MA 02110
 Ph: (617) 235-2291
 Fx: (617) 235-2253

From: OCC Clearing Member _____
 OCC Clearing Number _____

Re: BOX Options Participant _____
 BOX Options Participant Account _____
 Acronyms _____

The BOX Options Participant mentioned above has represented to the undersigned Clearing Member of the Options Clearing Corporation (“OCC Clearing Member”), that it is a registered BOX Options Participant of BOX Options Exchange LLC (the “Exchange”) with full trading rights including trading for its own account, acting as Market Maker and submitting and executing orders as agent on behalf of customers.

Pursuant to the trading of the above referenced BOX Options Participant on the BOX Market and Rule 7200 and Rule 8070 of the Exchange Rules, the undersigned, OCC Clearing Member accepts financial responsibility for all BOX Market Transactions made by the above-referenced BOX Options Participant when executing such transactions through the undersigned OCC Clearing Member. This letter shall be deemed to be a Letter of Guarantee pursuant to Rule 7200 and Rule 8070 of the Exchange Rules and shall remain in effect until a written notice of revocation has been filed with the Exchange.

So long as written notification is received by 5:00 p.m. (Eastern Time), the revocation shall become effective the next trade day or such later date as is specified on the written notification. If the OCC Clearing Member wants a revocation to be effective the next trade day, it shall also contact the BOX Market Operations Center (“BOX MOC”) at (866) 768-8845 to confirm receipt of the notification. Any such revocation shall in no way relieve the undersigned OCC Clearing Member of responsibility for Exchange Transactions guaranteed prior to the effective date of such revocation.



Agreed and signed this date:

OCC Clearing Member
Representative Signature:

Print Name:

Title:

Phone Number:
