



Southwest Securities, Inc. and/or Broker/Dealers for which it clears
 Southwest Securities, Inc. Member NYSE/NASD/SIPC

Cash Account Application

1. Account Registration. (Check ONE.)

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> 1. Individual | <input type="checkbox"/> 4. Joint Tenants with Rights of Survivorship <i>(Except LA Residents)</i> | <input type="checkbox"/> 8. Corporate ¹ | <input type="checkbox"/> 12. Non-Profit ¹ |
| <input type="checkbox"/> 2. Custodial <i>(UTMA/UGMA)</i> | <input type="checkbox"/> 5. Joint Tenants in Common <i>(50%/50%, unless otherwise noted, ___%/___%)</i> | <input type="checkbox"/> 9. Partnership ¹ | <input type="checkbox"/> 13. Trust ¹ |
| <input type="checkbox"/> 3. Investment Club ¹ | <input type="checkbox"/> 6. Community Property <i>(Residents of AZ, CA, ID, LA, NV, NM, TX & WA ONLY)</i> | <input type="checkbox"/> 10. Sole Proprietorship ¹ | <input type="checkbox"/> 14. Estate ¹ |
| | <input type="checkbox"/> 7. Non-Corporate ¹ | <input type="checkbox"/> 11. Pension/PSP ¹ | |

¹ Please ATTACH a copy of the proper documentation that specifically states who may enter orders.

2. Account Title.

Full Name of Applicant/Custodian (First, Middle, Last) Social Security # Date of Birth

Full Name of Co-Applicant/Minor, if applicable (First, Middle, Last) Social Security # Date of Birth

Home Address (P.O. Box unacceptable) City State/Province Country Zip Length of Residence

Mailing Address (P.O. Box acceptable) City State/Province Country Zip

Home Phone Number Fax Number Email Address

3. Client Profile.

Marital Status: Single Married Divorced Widowed N/A Number of Dependents: _____
 Citizenship Status: U.S. Citizen Resident Alien Non-Resident Alien *(If a Non-Resident Alien, you MUST fill out a Substitute W-8 form.)*

Employment Information: *(Please specify if unemployed, retired, homemaker, or student. If self-employed, please specify industry.)*

Employer (If self-employed, please specify name of business.) Position Business Telephone

Employer's Address City State/Province Country Zip

Co-Applicant's Employment Information: *(Please specify if unemployed, retired, homemaker, or student. If self-employed, please specify industry.)*

Employer (If self-employed, please specify name of business.) Position Business Telephone

Employment Affiliation:

Yes No Are you or co-applicant or spouse an employee of or affiliated with a securities firm, exchange or any of its affiliated companies?
(If yes, please specify the company name and address to which duplicate statements and confirmations should be sent.)

Yes No Are you or co-applicant or spouse a director, officer, or 10% shareholder of any publicly traded company?
(If yes, please specify company name and symbol.)

Yes No Does any other person have Power of Attorney over this account? If yes, please specify individual's full name.
(We must have a copy of the written agreement conferring authority, such person's name, relationship to you and their investment experience.)

Credit References:

Reference 1: _____ Reference 2: _____ Reference 3: _____

Investment Objectives (You may rank two objectives):

- Capital Preservation:** Preserving the value of your existing assets by investing in securities with a smaller degree of risk of loss of principal. May include investment in government bonds or certificates of deposit.
- Income:** Generating current income by investing in securities with a lower degree of risk of loss of principal. May include investing in investment grade corporate bonds, bond funds or unit investment trusts.
- Growth:** Generating capital appreciation by investing in securities with a higher degree of volatility and risk of loss of principal. May include investing in stocks or mutual funds.
- Speculation:** Trading volatile securities with a higher than average possibility of loss of principal with the hope of achieving commensurate gains. May include investing in low priced securities, options, non-rated bonds or non-investment grade bonds.

Financial Information – Primary Applicant:

Investment Experience (# of Years)	Estimated Annual Income	Estimated Net Worth	Estimated Liquid Net Worth	Tax Status
<input type="checkbox"/> Stocks _____	<input type="checkbox"/> Under \$25,000	<input type="checkbox"/> Under \$50,000	<input type="checkbox"/> Under \$50,000	<input type="checkbox"/> 15%
<input type="checkbox"/> Bonds _____	<input type="checkbox"/> \$25,000-\$49,999	<input type="checkbox"/> \$50,000-\$99,999	<input type="checkbox"/> \$50,000-\$99,999	<input type="checkbox"/> 28%
<input type="checkbox"/> Options _____	<input type="checkbox"/> \$50,000-\$99,999	<input type="checkbox"/> \$100,000-\$249,999	<input type="checkbox"/> \$100,000-\$249,999	<input type="checkbox"/> 31%
<input type="checkbox"/> Commodities _____	<input type="checkbox"/> \$100,000-\$250,000	<input type="checkbox"/> \$250,000-\$499,999	<input type="checkbox"/> \$250,000-\$499,999	<input type="checkbox"/> 36%
<input type="checkbox"/> Futures _____	<input type="checkbox"/> Over \$250,000	<input type="checkbox"/> \$500,000-\$999,999	<input type="checkbox"/> \$500,000-\$999,999	<input type="checkbox"/> 39.6%
<input type="checkbox"/> Other _____		<input type="checkbox"/> Over \$1,000,000	<input type="checkbox"/> Over \$1,000,000	

Financial Information – Co-Applicant (If applicable):

Investment Experience (# of Years)	Estimated Annual Income	Estimated Net Worth	Estimated Liquid Net Worth	Tax Status
<input type="checkbox"/> Stocks _____	<input type="checkbox"/> Under \$25,000	<input type="checkbox"/> Under \$50,000	<input type="checkbox"/> Under \$50,000	<input type="checkbox"/> 15%
<input type="checkbox"/> Bonds _____	<input type="checkbox"/> \$25,000-\$49,999	<input type="checkbox"/> \$50,000-\$99,999	<input type="checkbox"/> \$50,000-\$99,999	<input type="checkbox"/> 28%
<input type="checkbox"/> Options _____	<input type="checkbox"/> \$50,000-\$99,999	<input type="checkbox"/> \$100,000-\$249,999	<input type="checkbox"/> \$100,000-\$249,999	<input type="checkbox"/> 31%
<input type="checkbox"/> Commodities _____	<input type="checkbox"/> \$100,000-\$250,000	<input type="checkbox"/> \$250,000-\$499,999	<input type="checkbox"/> \$250,000-\$499,999	<input type="checkbox"/> 36%
<input type="checkbox"/> Futures _____	<input type="checkbox"/> Over \$250,000	<input type="checkbox"/> \$500,000-\$999,999	<input type="checkbox"/> \$500,000-\$999,999	<input type="checkbox"/> 39.6%
<input type="checkbox"/> Other _____		<input type="checkbox"/> Over \$1,000,000	<input type="checkbox"/> Over \$1,000,000	

4. Account Funding.

- Enclosed is a check in the amount of \$ _____ (Make check payable to Southwest Securities, Inc.)
- Enclosed is/are security certificate(s). (Please endorse certificates exactly as they are registered on the front.)
- Enclosed is an ACAT Form and a copy of my most recent statement to transfer ALL or PART of my account from

5. Account Instructions.

Dividends (Check ONE): Hold in account Send check Send ACH (ACH paperwork must be completed.)
 Money (Check ONE): Hold in account Send check

For your convenience, Southwest Securities, Inc. ("SWST") will hold all securities you purchase through your broker in "street name". Please contact your broker if you wish to have securities transferred and shipped to you.

6. Account Agreement and Special Instructions. (Please read and sign.)

You hereby request that Your Broker maintain a Brokerage Account in the name(s) listed on this Application. You acknowledge that you have received, read and understood the SWST Cash Account Agreement Section of the Customer Information Brochure and you agree to be bound by the terms and conditions of the Agreement that apply to your Brokerage Account, as amended and that you will contact Your Broker regarding any questions that may relate to your account.

Under rule 14b-1(c) of the Securities Exchange Act, a broker is required to disclose to an issuer the name, address, and securities positions of our customers who are beneficial owners of that issuer's securities unless the customer objects. If you object to the disclosure of such information, please check box:

By signing this Application, you confirm your intention to reinvest cash credit balances held by SWST in your name, and you further confirm that this cash credit balance is being maintained in your account solely for the purpose of reinvestment. You acknowledge your understanding that cash balances of up to \$100,000 are protected by the Securities Investor Protection Corporation (SIPC), but SIPC coverage is not available for funds maintained solely for the purpose of earning interest.

Certification of Taxpayer ID Number (Substitute W-9): Under penalty of perjury, you certify that (1) the number shown on this form is your correct taxpayer identification number, and (2) you are not subject to backup withholding because (a) you are exempt from backup withholding, or (b) you have not been notified by the Internal Revenue Service (IRS) that you are subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified you that you are no longer subject to backup withholding (does not apply to real estate transactions, mortgage interest paid, the acquisition or abandonment of secured property, contributions to an individual retirement arrangement (IRA), and payments other than interest and dividends), and (3) you are a U.S. person (including a U.S. resident alien). You understand that you must cross out item (2) above if you have been notified by the IRS that you are currently subject to backup withholding because of underreporting interest or dividends on your tax return.

In consideration of the firm accepting an account for me/us, I/We ("I") acknowledge that I have read, understand and agree to be bound by the SWST Cash Account Terms that I acknowledge receiving at the time the account was opened. **I further acknowledge that I have read and understand the pre-dispute arbitration clause located in paragraph 35 of the Cash Account Agreement Section of the Customer Information Brochure and agree to resolve any disputes arising out of my account by arbitration.** I certify that the foregoing client information is accurate and I am aware that the information is relied on by the broker in servicing my account. If I experience a material change in circumstances, I will provide my broker with an updated Application.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

X _____ **X** _____
 Applicant's Signature Date Co-Applicant's Signature Date

FOR BROKER USE ONLY

Office #: _____ Rep #: _____ Account #: _____	Customer Information Brochure Delivered: _____ / _____ / _____
	Privacy Policy Delivered: _____ / _____ / _____
X _____ Investment Representative's Signature Date	X _____ Principal's Signature Date