



PERSONAL SECURITIES/ BROKERAGE ACCOUNTS

If you have accounts in which securities transactions can be affected, and in which you have a beneficial interest (i.e. spouse accounts, children's accounts, accounts for which you control or whose financial support you contribute), please list them below.

Note: Accounts held directly at mutual fund or insurance companies are exempt from reporting.

If you do not have any personal securities accounts, please mark NO and proceed to the bottom of the form, sign, and date it to attest that you hold no accounts that would need to be disclosed.

☐ NO, I do not have any personal securities accounts. Date: _____

Custodian/Brokerage Firm Name

Account Type

Account Number

Name(s) on Account

Advisor/RR/IAR Name/Number

Brokerage Address

Custodian/Brokerage Firm Name

Account Type

Account Number

Name(s) on Account

Advisor/RR/IAR Name/Number

Brokerage Address

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Custodian/Brokerage Firm Name

Account Type

Account Number

Name(s) on Account

Advisor/RR/IAR Name/Number

Brokerage Address



PERSONAL SECURITIES/BROKERAGE ACCOUNTS (CONT.)

Custodian/Brokerage Firm Name	Account Type	Account Number
Name(s) on Account	Advisor/RR/IAR Name/Number	
Brokerage Address		

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Name(s) on Account	Advisor/RR/IAR Name/Number	
Brokerage Address		

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Name(s) on Account	Advisor/RR/IAR Name/Number	
Brokerage Address		

Note: If additional space is required, please fill out and attach a supplemental page.

ATTESTATION & SIGNATURE

- I hereby agree to notify Spire promptly (and in any case, within ten (10) days of any significant modifications to the information disclosed on this form, including additional or changed accounts, new licenses or registrations, employers or sources of income, or significant changes in the amount of income from a source specified herein).
- I hereby agree to promptly provide such supporting documents relating to my disclosed activities as Spire shall request.
- I hereby certify that all answers above are true and correct to the best of my knowledge and that the statements and answers provided represent an accurate representation of my activities and accounts.
- I understand and agree that I may NOT engage in the disclosed activity or open the securities account proposed until I receive written acknowledgement of approval from Spire's Compliance Department.
- I understand and agree that if Spire does not approve my disclosed outside activity or the establishment of a securities account with another broker-dealer, that I MAY NOT engage in the activity or establish such account.

SIGNATURE

PRINT NAME

DATE

RR #



PERSONAL SECURITIES/BROKERAGE ACCOUNTS SUPPLEMENTAL LIST

Custodian/Brokerage Firm Name	Account Type	Account Number
Name(s) on Account	Advisor/RR/IAR Name/Number	
Brokerage Address		

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