

MGEX Error Trade Adjustment - Cancellation Claim Form



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The following information and attached MGEX Error Trade Adjustment/Cancellation Claim Form ("Claim Form") are intended to provide guidance to an individual or firm ("Claimant") that wishes to file a claim for losses resulting from a trade adjustment or cancellation. For information on the potential liability of the Exchange or a trade counterparty related to limitation of liability, trade cancellations and price adjustments, arbitration and claims against the Exchange involving trading systems or services, please refer to Exchange Rules 3.3.1. through 3.3.8., and Exchange Rule 1816.00. For more information on the non-reviewable ranges, please refer to MGEX.com and Exchange Rule 3.3.8. If you have any questions regarding the processes related to filing trade adjustment/cancellation claims, please contact Layne G. Carlson at lcarlson@mgex.com or (612) 321-7169.

Procedures for Filing a Trade Adjustment/Cancellation Claim

Exchange Rules 3.3.1. through 3.3.8. provides that a party entering an order that results in a price adjustment or trade cancellations shall be responsible for demonstrated claims of realized or out-of-pocket losses, subject to certain limitations.

All claims for losses resulting from price adjustments or cancellations will be examined by Exchange staff. To file a claim for damages, an individual or firm ("Claimant") must complete a Claim Form, attached to this document. Claims for losses under this section must be filed with the Corporate Secretary within five (5) business days of the event giving rise to the claim. Failure to file a Claim Form correctly and in a timely manner will result in the claim's denial.

On the Claim Form, a Claimant must clearly, and in detail, indicate the facts upon which the claim is based. Additionally, Claimants must provide evidence of loss, including, among other things, profit and loss statements and any other documents deemed relevant.

Should the Exchange determine that a payment will be made, the Claimant shall sign a release waiving any and all claims or potential claims against the Exchange. In the event a claim is denied, the Claimant has the right to submit the claim to arbitration in accordance with Exchange Rule 3.3.5.

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Please be as thorough as possible in completing the Claim Form and attach additional sheets if the space provided is insufficient. Completed Claim Forms should be forwarded, along with all supporting documentation, to lcarlson@mgex.com or the following address:

MGEX Secretary 400 South 4th Street 130 Grain Exchange Building Minneapolis, MN 55415 ATTN: Layne G. Carlson



Claimant Name:				
Clearing Member:				
Claim Filing Date:				
Claimant Address:				
City: State:	Zi	o Code:		
Country (only if not USA):				
Phone (include area code):				
Fax:				
Email Address:				
Date of Incident:	Time of Incident:	Time of Incident:		
Contract Involved:				
When did you discover that a problem existed	?			
Did you contact the Exchange or its designee	? Yes		No	
If yes, to whom did you speak?				



What was the result?				
Did you contact any other Exchange	Department(s)?	Yes	No	
If yes, to whom did you speak?				
What was the result?				
Please describe in detail the events giving rise to your claim (attach additional sheets if necessary):				



What is the amount of your claim?
Please describe in detail how you arrived at the claim amount set forth above:
Please any documentation supporting your claim. This Claim Form must be filed within the time frame prescribed by the identified Exchange Rules.
MGEX Rulebook:
View rulebook <u>here</u> .
For support information and contact numbers for the Exchange's Designee (CME Global Command Center) click <u>here</u> .



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