

CORRESPONDENT CUSTOMER'S OPTION APPROVAL FORM

Southeast Investments, N.C., Inc.

Account Number _____ Account Name _____

Customer Address _____

TYPE OF OPTIONS: _____ EQUITY _____ INDEX

OPTION EXPOSURE LEVEL: _____

TYPES OF STRATEGIES (select all that apply):

		MANAGER APPROVAL		INITIAL
		Y	N	
_____ Purchases	(Put/Call Spreads and Put/Call Buys)	Y	N	_____
_____ Covered	Covered Call Writing	Y	N	_____
_____ Combination	Buy/Sell Puts and Calls	Y	N	_____

AGREEMENT AND CERTIFICATION:

Correspondent has in its files available for inspection by any regulatory agency or exchange or national association adequate information relative to this customer's income, assets, net worth, and investment objectives. Correspondent agrees that it shall enter or accept only orders consistent with the customer's financial situation and investment objectives. Correspondent has provided the customer with a current Option Disclosure Document titled "Characteristics and Risks of Standardized Options" and Correspondent has on file a duly signed Customer's Option Agreement which conforms fully to the requirements of the Options Clearing Corporation, all applicable laws, rules and regulations, the securities exchanges which trade options, and Correspondent's standards and practices.

REGISTERED REP: _____
Signature Date

ROP: _____
Signature Date

SROP: _____
Signature Date

ECROP _____
Signature Date