

**Request for re-allocation of distributed lists for banks**



**BRAINTRADE**

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**Ordering customer**

Company name

First and second name of functional contact person

Phone number

Fax number

E-mail address

CBF account number    Additional account number(s) (if desired)

Product description	Specification	Allocation type		
		By e-mail	By telefax	Date from / until
XONTRO Trade – Daily price differences list	<input type="checkbox"/> J_180041	<input type="checkbox"/>	<input type="checkbox"/>	
XONTRO Trade – Monthly brokerage list	<input type="checkbox"/> J_1800_2	<input type="checkbox"/>	<input type="checkbox"/>	
Only Frankfurt: Transaction fees per order using .TXT-Format: RP001 (daily) / RP002 (monthly)	<input type="checkbox"/> .txt file J_530005 / J_530015	<input type="checkbox"/>	<input type="checkbox"/>	

**We acknowledge the fact that the renewed allocation will be charged with an extra €50 fee per document delivered.**

**Please send the invoice for this order to the following address:**

Company name

Addressee's first and second name

Street address / POB

Zip code, city, country

Date

Ordering customer's signature