COUNTY OF ORANGE

BROKER-DEALER APPLICATION



PREPARED BY THE OFFICE OF THE COUNTY TREASURER SHARI L. FREIDENRICH, COUNTY TREASURER

BROKER:

Section I: STATEMENT OF POSITION AND GENERAL REQUIREMENTS

The County of Orange Treasurer-Tax Collector will annually review the financial condition, services provided, and registration of broker-dealers that are authorized to provide financial services to the County in order to determine whether these broker-dealers should remain on the County's "Approved Provider List." In addition, the County may periodically solicit requests from brokers not on the approved list to apply for consideration and also receives unsolicited requests for broker-dealers to be considered for approval.

As part of this process, the County also provides each broker-dealer with a copy of the County's most current "Investment Policy Statement" and a certification form. Each broker-dealer is required to complete and submit the certification form as proof that it has received the County's "Investment Policy Statement," read it, and intends to comply with it.

Section II: APPLICATION REQUIRED DOCUMENTATION

The County must <u>receive</u> the following documents from each prospective only broker-dealer and annually from each approved broker-dealer within 60 days of year-end:

- ✓ A completed Broker-Dealer Application (prospective only)
- ✓ A copy of the firm's most recent audited <u>Annual Report</u>
- A copy of the firm's current Form BD Status Report
- ✓ A copy of wiring and delivering instructions
- ✓ MSRB Rule G-37 filing for the past 48 months

Also, in the case of a regional broker:

A copy of the firm's most recent SEC Form X-17 A-5 "Focus Report" (in the case of a non-bank) or most recent Consolidated Reports of Condition and Income for A Bank With Domestic and Foreign Offices – FFIEC 031 (in the case of a bank)

These documents may be delivered in person, by mail, or by courier to:

Mailing Address: Physical Address:

County of Orange, Treasurer-Tax Collector Attn: Shari L. Freidenrich, CPA Post Office Box 4515 Santa Ana, California 92702-4515 County of Orange, Treasurer-Tax Collector 625 N. Ross Street Hall of Finance, Building 11, Room G-58 Santa Ana, California 92701

If a currently authorized broker-dealer fails to submit the above-referenced documents by the specified deadline, then the County may suspend all business dealings with that broker-dealer, and may elect to terminate its business relationship with the broker-dealer.

If you have any questions about this application, please contact Shari Freidenrich at (714) 834-7625 or Paul Cocking at (714) 834-4774.

Section II: APPLICATION FOR AUTHORIZED BROKER-DEALER DISCLOSURE

1.	Name of Firm	CRD#
2.	Address(Local)	(National Headquarters)
3.	please identify the name, date of the nar	ent business name in the last 12 months? If so, me change, and the reason for the name change.
4.	Telephone No. ()(Local)	
5.	Primary Representative:	Manager/Partner-in-Charge
	Name: Title: Telephone No.: () Fax No.: () E-Mail: No. of years in Institutional Sales: No. of years with firm: CRD #:	Name: Title: Telephone No.: () Fax No.: () E-Mail: No. of years in Institutional Sales: No. of years with firm: CRD #:
6.	Are you a Primary Dealer in U.S. Government	ment Securities? ☐ Yes ☐ No
7.	Are you a Regional Dealer in U.S. Govern	nment Securities? Yes No
8.	If your firm <u>IS NOT</u> a primary dealer, has Bank's capital adequacy guidelines over to the second of the second o	as it consistently complied with the Federal Reserve the last 12 months? (check one)
9.		you DO NOT own positions of Securities?
	□ Yes □ No	. you <u>= =</u> poomone or occurred.
10		m?
		?
		any? If so, what is its name and net capitalization?

13.	Do you participate i	in the SIPC Insurance progra	m? If not, please explair	1.
14.	Which of the follow	ing instruments does your lo	cal desk offer regularly?	
	T-Bills	☐ Treasury Notes/Bonds	☐ Discount Notes	□ NCD'S
	Agencies (specify)			
	BA's (Domestic)	☐ BA's (Foreign)	☐ Commercial Paper	☐ Mid-Term Notes
15.	Which of the above	does your Firm specialize in	Marketing?	
16.		most directly comparable Lo Contact Person	ocal Agency clients in our Telephone No.	r geographical area. <u>Client Since</u>
17.	What reports, trans	actions, confirmation and pa	per trail would we receiv	/e?
18.	provides to local ag	ples of research reports or gency clients. Please include il, FAX). Please include any	what types of commun	ication or method of
		re taken by your Firm to progencies as investors?	otect the interest of the	public when dealing
	pending, adjudicate improper, frauduler the purchase of second	n subject to any <u>litigation, a</u> ed, or settled within the lant, disreputable, or unfair acturities from institutional clientonal of the second	est 12 months, that invitivities related to the sants? (check one)	olved allegations of

21.	. Has your firm been subject to a regulatory, state, or federal agency <u>investigation</u> , within last 12 month for alleged improper, fraudulent disreputable, or unfair activities relate the purchase or sale of securities? (check one)				
	☐ Yes ☐ No If "yes", please describe each matter briefly.				
22.	2. Attach certified documentation of your capital adequacy and financial solvency. In additional an audited financial statement must be provided within 120 days of your fiscal year-end.				
23.	8. Please indicate a percentage breakdown of your client base by portfolio size.				
24.	Have any of your firm's public sector clients ever sustained a loss on a securities transaction or loss of principal arising from a misunderstanding or misrepresentation of the characteristics of a financial instrument that was recommended by and purchased through your firm? (check one)	risł			
	☐ Yes ☐ No If "yes", please describe each matter briefly.				
25.	Have any of your firm's public sector clients claimed, in writing, within the last five years that your firm was responsible for any investment losses? (check one)				
	☐ Yes ☐ No If "yes", please describe each matter briefly.				
26.	Is the Primary Member, or other member in the local office, an Associate member of following:	the			
	Yes No Organization How Long Member Name CMTA:	 			
27.	What training would you provide for our employees and investment officers?				
28.	8. What portfolio information do you prefer from your clients?				

DATE: _____

directed to give consopportunities to present NOTE: Comple and DOES NOT guar business with the Co	tion of Application is only part of County's certification process arantee or imply that the applicant will be approved to do
opportunities to present NOTE: Comple and DOES NOT gua	tion of Application is only part of County's certification process arantee or imply that the applicant will be approved to do
directed to give cons	
date hereof, our firm Dealers and Qualified I	read the Orange County 2013 Investment Policy Statement. As of the meets the requirements as shown in section XI. <u>Authorized Financial nstitutions</u> of your 2013 Investment Policy Statement. All salespersons will be made aware of this Investment Policy Statement, and will be sideration to its provisions and constraints in selecting investment
Section III: CERTII	FICATION
	wish to provide more complete answers than space permits, question numbers on an attachment.
□ Yes □ No	
30. Does your firm me operation? (check of	et the County minimum capitalization of \$10 million and five years of one)
	ppy of your firm's MSRB Rule G-37 filling.
month period, ma contained in Rule G or any member of	of security firm shall be selected who has, within any consecutive 48-de a political contribution in an amount exceeding the limitations is 37 of the Municipal Securities Rulemaking Board, to the local treasurer the Board of Supervisors or to any candidate for these offices. Please

COUNTERSIGNED: ______ NAME (print):______