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EXHIBIT 3

CLEARING MEMBER RESTRICTION FORM

OCC Clearing Member Information										
Clearing Mem	mber:					Date:				
In accordance with Nasdaq rules, the Clearing Member listed above authorizes Nasdaq to restrict The Options Clearing Corporation ("OCC") number(s) listed below requiring prior authorization for use as a Give-Up on Nasdaq Phlx, LLC, The Nasdaq Options Market LLC, Nasdaq BX, Inc., Nasdaq ISE, LLC, Nasdaq GEMX, LLC and Nasdaq MRX, LLC (collectively "Nasdaq Markets"), respectively. The Clearing Member must indicate below the OCC number(s) to be restricted for each relevant Nasdaq Market. NOTE: Once an OCC number is marked as restricted, no Member/Participant/member organization will be able to use that restricted OCC number unless they have either: (1) an executed clearing guarantee on file with Membership with that Clearing Member; or (2) the Member/Participant/member organization is authorized by the Clearing Member pursuant to the applicable Nasdaq Market rule. Instructions: To authorize or revoke a Member's/Participant's/member organization's use of a restricted OCC number, please enter the applicable information below and submit to membership@nasdaq.com. List the restricted OCC number in column 1 and provide, if applicable, each Member/Participant/member organization that is authorized or restricted on each OCC number in column 2. Check all applicable Nasdaq Markets in columns 3 through 10. If necessary, please attach additional sheets.										
1	2	3	4	5	6	7	8	9	10	
Restricted OCC Number	Member / Participant / Member Organization	A u t h o r l z e d	R e v o k e d	PHLX		ВХОР	ISE	GEMX	MRX	
2										

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Page 2 Clearing Member Restriction Form - Continued

3										
4										
5										
By executing this Clearing Member Restriction Form, the Clearing Member grants Nasdaq permission to publish the Clearing Member's restricted OCC number(s) on Nasdaq's website for purposes of providing notice to other exchange members that the Clearing Member's OCC number(s) will not be available for Give Up.										
Authorized Applicant Signature:				Date:						
·										
Print Name:			Title:							
Clearing Member Contact Person (to be provided to market participants seeking authorization)										
For all Address.			Dhana							
Email Address:				Phone:						