PORTAL

LEADERSLINK

MAKE A PAYMENT NEW ACCOUNT FORMS

LOG OUT

OUTSIDE BUSINESS ACTIVITY REQUEST FORM

Name of Outside Business Activity*	
Activity Start Date *	
Address where activity will be conducte	d:*
Describe nature of the outside business	!*
Is this a Securities-Related Business?*	select an item
Will current TLG clients be contacted?*	select an item ✓
Activity identified as not affiliated with	TLG?*select an item
Hours per month spent on activity: *	
Hours/month during securities trading	hours**: *
What is your capacity/role?*	

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	Rep I	lame*		
	Form comple	ted by		
Email (for s	submission confirn	nation)*		
	Rep Nu	mber*		
** Oı	ut of the total hours	per month spent on this	s activity, how many occur du	ring security
			tr	ading hours?
For qu	estions about this	form,	tr	ading hours?
	estions about this		tr	ading hours?
		tions:	tr	ading hours?
pleas	e contact Registra	tions: x163	tr	ading hours?
pleas	e contact Registra (303) 797-9080	tions: x163	tr	ading hours?
pleas	e contact Registra (303) 797-9080	tions: x163	tr	ading hours?
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