

請在我/我們之股票賬戶中扣除一切開支。

_ (Note 7 註)

根據《證券及期貨條例》下的持牌法團(CE 編號 API164)及香港聯合交易所有限公司參與者 Licensed Corporation under the Securities & Futures Ordinance (CE No. API164) and Exchange Participant of the Stock Exchange of Hong Kong Limited

順安證券資產管理有限公司 CIS Securities Asset Management Limited

香港灣仔告士打道 181-185 號中怡大廈 21 樓 21/F, Centre Point,

181-185 Gloucester Road, Wanchai, Hong Kong Website: www.cissecurities.com

電話 Tel: (852) 3112 8686 傳真 Fax: (852) 2850 8463

SI / ISI Request Form 股票交收指示/獨立投資者交收指示申請表

To 致: Settlement Department 交收部			Date 日期:					
Account No. 帳戶號码	馬:	Account Name	長戶名科	爯:				
□ RECEIVE the following	securities from t	he said Participant for my/our above account.	接收下	列之股票至我/我們之月	≦□ ∘			
□ DELIVER the following	securities from r	ny/our above account to the said Participant.	由我/我(門之戶口提出下列之服	票。			
Please input the following S	I into CENTRAI	L CLEARING & SETTLEMENT SYSTEM ((CCASS)	to effect settlement with	h details as follow	/s:		
請輸入下列指示於中央	結算系統進行	交收:						
□ ISI 獨立投資者	首交收指示	investor Account N	o.: 投	資者帳戶號碼:				
□SI 股票交收指	示							
Name of Counterparty 參與者名稱		Counterparty ID 參與者代號	Contact	Person 聯絡人	Telephone No. 電話			
(Note 1 註)		(Note 2 註)						
					FOR OFFICE	E ISE ONI	LY 公司專用	
Settlement Date	Stock Code	Name of Stock 股票名稱]	No. of Share (s)	SI Reference Number		BOS Ref.	
交收日期	股票代號			股票數量	中央結算系統編號		後勤系統編號	
(Note 3 註)								
Payment Instruction 付款指示		□ Against Payment (DVP) (Note 4 註)	款項HI	IK\$:(Note 5 註)				
		□ Free of Payment (FOP) (Note 6 註)						
FOR OFFICE USE ONLY 公司專用		□ C = Broker – Custodian 經紀受托管交收						
Purpose of SI		□ M = Portfolio Management 股票組合轉移						
交收指示目的		□ I = Investor Account 投資者賬戶						
				FOR OFF	ICE USE ONLY	公司專用		
Please debit the captioned account for any costs or charges so incurred.				SI Fee 交收費用 HK\$				



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Notes for Completion of SI / ISI Request 交收指示填寫須知

Note 附註

1. Please fill in the full name of counterparty, this box must be filled in.

請填上參與者之全名,此空格必需填寫。

2. Please fill in the counterparty ID number, this box must be filled in. (For example: B0XXXX or C0XXXX)

請填上參與者代號(例如: B0XXXX/C0XXXX),此空格必需填寫。

3. Please fill in the expected settlement date of receiving/delivering securities from/to counterparty.

請填上由/從本公司/另一參與者接收/提出股票之預計交收日期。

4. Please tick the box in the event of receiving/delivering securities against payment.

如接收/提出證券需付予款項,請填上√號。

5. This blank must be filled in amount if Note 4 has been marked with $\sqrt{\ }$.

如附註4已填上√號,請在此項填上金額。

6. Please tick the box in the event of receiving/delivering securities "free of payment".

如接收/提出證券無須付款,請填上√號。

7. This form must be signed by securities account holder(s). A form which is not properly signed will be rejected.

本表格必需由股票戶口客戶簽署,本公司不接納未簽妥之表格。

Important Note 重要附註

1. Please fill out our S.I. form and return it to us. Besides, please fill out the S.I. form provided by counterparty and return it to the counterparty promptly.

請填妥本公司之交收指示表格,並交回本公司。同時,請填妥交收對手提供之交收指示表格,並即交回交收對手。

2. Counterparty information of CIS Securities Asset Management Limited.

順安證券資產管理有限公司之參與者資料。

Name of Counterparty:	CIS Securities Asset Management Limited. 順安證券資產管理有限公司				
Counterparty ID	B01849				
Contact Person	Settlement Department				
Telephone No.	3112-8662 / 3112-8634				