



客戶提款指示

Fund Withdrawal Instruction

Please return your completed form by mail to Customer Service Department, Room 1803-10, 18/F, China Insurance Group Building, 141 Des Voeux Road Central, Hong Kong or by fax (852) 3971 3600 or by e-mail cs@asasec.com.
 請將已填妥的表格郵寄至香港中環德輔道中 141 號中保集團大廈 18 樓 1803-10 室客戶服務部或傳真至(852) 3971 3600 或電郵至 cs@asasec.com

賬戶號碼 Account Number: _____ 日期 Date : _____

賬戶名稱 Account Name: _____

請從本人/吾等在 貴公司開設之上述戶口扣除 港幣 人民幣 _____ 並以下列形式發放給本人/吾等
 Please debit HKD RMB _____ from my / our account held with you as stated above and deliver to me /us in the following methods

請在適當方格 加上✓號 Please tick at the appropriate box :

支票存入 Bank-In Cheque

銀行名稱 Bank Name: _____

賬戶號碼 Bank A/C No: _____

賬戶名稱 Beneficiary Name: _____

港元匯款 Telegraphic Transfer in HKD

(附註: 每項手續費港幣 200 元; 另加銀行額外收費。 Note: HKD200 per transaction plus extra bank charges.)

銀行戶口詳情 Account Details

銀行名稱 Bank Name: _____ 分行 Branch: _____

銀行戶口號碼 Bank Account No.: _____ 銀行號碼 Swift code: _____

銀行地址 Bank Address: _____

轉撥至本人/吾等在富國之戶口 (請選擇)

Transfer to the following my/our accounts with your company (Please select):

現金證券 Securities Cash 期貨合約 Futures Contracts

戶口號碼 Account No.: _____

客戶簽署: _____

Client Signature: _____

聯絡電話 _____

Contact No.: _____

客戶主任 / 代理人簽署: _____

A.E. / Agent Signature: _____

客戶主任 / 代理人姓名: _____

A.E. / Agent Name: _____

附註 Note:

請於中午十一時正前將指示送交至客戶服務部, 否則該指示將在下一個工作日辦理

Please send your withdrawal instruction to us on or before 11:00am. Otherwise your instruction will be executed on next working day.

| | | | | |
|-----------------------|--------------------|------------------|------------------|-------------|
| For official use only | | Remarks | | |
| Signature Verified by | Input & Checked by | Settlement Dept. | Accounting Dept. | Approved by |
| Date: | Date: | Date: | Date: | Date: |