

To: Guotai Junan Securities (Macau) Company Limited
Avenida Doutor Mário Soares, FIT Center of Macau, 9 Andar C2, Macau
Tel: (853) 2881 1788 Fax: (853) 2881 1798

致：國泰君安證券(澳門)一人有限公司
澳門蘇亞利斯博士大馬路財富中心9樓C2座
電話：(853) 2881 1788 傳真：(853) 2881 1798

Dear Sirs 敬啟者,

Application for Addition/Deletion of Standing Payment Instruction
申請新增/刪除常設提款指示

I/we hereby request to add/delete my/our settlement bank account¹ details as follows:

本人/吾等 謹此要求 貴公司將本人/吾等之交收銀行¹新增/刪除如下：

Client Code 賬戶號碼		
Client Name 賬戶名稱		
Settlement Bank Name 交收銀行名稱		
Settlement Bank Account Number 交收銀行賬戶號碼		Currency 貨幣

Note: Only accept bank account in Macau 注意:只接受澳門銀行賬戶

Documents to be provided:

Supporting document of the bank account to be registered (e.g. bank statement showing the relevant name and account number)

需提交之證明文件:

登記之銀行賬戶證明文件(例如銀行結單需顯示姓名及銀行賬戶號碼)

I/We understand my/our above request is subject to the acceptance of your Company(ies).

本人/吾等明白上述要求須待貴公司接納方可生效

¹ * Delete as appropriate 適當刪除



Declaration 聲明

I/We, the under-signed, hereby confirm that:

1. I/we shall refer to Fees Schedule for remittance bank charges;
2. I am/we are the ultimate beneficial owner of the funds in the above Account;
3. The source of the fund or the purpose of the remittance do not involve terrorist financing activities, or proceeds of organized and serious crimes;
4. I/we shall bear the losses, responsibilities and risks pertinent to this withdrawal, transfer or payment to third party instruction;
5. I/we have enquired with the receiving bank and confirm that the receiving bank can receive the fund to be transferred from your company; and
6. I/we understand that the funds are remitted in the name of your company;
7. I/we understand that the submission deadline is 2:00 pm for normal business day and 11:00am for half trading day; Instruction will be handled by next business day if submission after the cut-off time;
8. I/we acknowledge and agree that the staff of your company may at any time contact me/us over the phone to confirm the details of my/our withdrawal request if they have any questions on its validity; and that your company is entitled to reject my/our withdrawal request without any liabilities if I/we am/are unable to verify the relevant details satisfactorily.

本人/吾等，以下簽署者，謹此確認：

1. 本人/吾等 明白並參閱收費明細以了解提款的銀行費用；
2. 證券 / 期貨 / 外匯 賬戶的款項最終受益人為本人/吾等；
3. 匯款來源 / 匯款目的並不涉及為恐怖分子集資活動、販毒得益或有組織及嚴重罪行的得益；
4. 本人/吾等 同意承擔可能因此提款、轉賬或付款至第三者而引致之爭議、損失、責任及風險；
5. 本人/吾等 已向收款銀行查詢並確認收款銀行可以接收從貴司匯出的款項；
6. 本人/吾等 明白所有匯款是以貴司之名義匯出；
7. 本人/吾等 明白截止提款時間為每天營業日下午 2:00 正和半天營業日為上午 11:00，任何在上述截止提款時間後收到的提款指示將當作次個工作日的提款；
8. 本人/吾等 明白如對轉款有任何疑問，貴司將隨時致電聯絡本人/吾等確認提款資料；如無法聯絡本人/吾等，提款手續將不獲辦理。



Client Signature 客戶簽署	
Signature of Client with Company Chop (if applicable) 客戶簽署及公司印章(如適用)	
Full Name of Client 客戶姓名	
Date 日期	

* * * * *

For GTJA Use Only	Signature Verified and Doc Checked by COB	System Inputted by COB	Reviewed by COB
Signature:			
Printed Name:			
Date:			