



Core Pacific – Yamaichi International (HK) Ltd. / (CPYI) / 京華山一國際 (香港) 有限公司
 Core Pacific – Yamaichi Securities (HK) Ltd. / (CPYS) / 京華山一證券 (香港) 有限公司
 Core Pacific – Yamaichi Futures (HK) Ltd. / (CPYF) / 京華山一期貨 (香港) 有限公司
 Fax 傳真：2918-9069 / 2877-2517
 Attn 收件：Settlement Department / 交收部

From 由：_____ Branch 分行 Date 日期：_____

INSTRUCTIONS 指示

(Withdrawal 提款 / Deposit 存款 / Transfer 轉帳 / FX 兌換)

CLIENT NAME 客戶姓名：_____ ACCOUNT NO. 客戶號碼：_____ Stock Options
 CCY 幣別/AMOUNT 金額：_____ VALUE DATE 生效日期：_____ 股票期權

WITHDRAWAL 提款：

Electronic Payment 電子轉帳 Bank-In Cheque 支票存入 Remittance 匯款
 Delivery Cheque 支票交 _____ Branch 分行 Client will pick up cheque at Head Office 客戶到總公司取支票
 Authorized Person's Name (If necessary) 被授權人姓名 (如適用)：_____
 Authorized Person's ID No. (If necessary) 被授權人身份證明號碼 (如適用)：_____

BANK NAME 銀行名稱：_____
 BANK ADDRESS 銀行地址：_____
 BANK ACCOUNT NO. 銀行帳戶號碼：_____
 BENEFICIARY NAME 收款人姓名：_____
 CONTACT TEL NO. 聯絡電話：_____

DEPOSIT 存款：

DEPOSIT TO CPY'S BANK A/C 轉帳至本公司之銀行帳戶：
 (HSBC 匯豐 / H.S.BK 恒生 / S.C.BK 渣打 / BOC 中國銀行 / HSBC Stock Options 匯豐期權 / OTHERS 其他)
 For Others, please specify 如為其他銀行，請註明：_____
 ATM Transfer 櫃員機轉帳 At Counter-Cash 櫃台現金 At Counter-Cheque 櫃台支票 At Counter-Transfer 櫃台轉帳 Remittance 匯款
 Internet Banking 網上轉帳 Phone Banking 電話轉帳 Others 其他 (Please specify 請註明：_____
 Deposit Time 存款時間：_____ Record Time 紀錄時間：_____ Reference No. 參考編號：_____

TRANSFER 轉帳：

FROM 由 (CPYS / CPYS Stock Options / CPYF / CPYI) _____ TO 至 (CPYS / CPYS Stock Options / CPYF / CPYI) _____

FX 兌換： QUOTE FX RATE TO AE BEFORE DONE 兌換成交前報價給業務主任

BUY 買 CCY 幣別 / AMOUNT 金額 _____ SELL 賣 CCY 幣別 / AMOUNT 金額 _____

Remarks 備註：_____

Note: 1. Original Instruction from Client is required if beneficiary is different from Client. 如收款人為第三者時，則正本必須交回公司。

2. *Must fill in these 2 items when beneficiary is different from Client name. 如收款人為第三者時，則必須填寫下列二項資料。

i) RELATIONSHIP WITH THE CLIENT 與提款客戶的關係*：_____

ii) BUSINESS REASON 業務原因*：_____

I / We 本人 / 吾等 _____ (Name of Client 客戶姓名) TAKE FULL RESPONSIBILITIES WITH RESPECT TO THE INFORMATION PROVIDED IS TRUE AND CORRECT. 確認上述提供的資料均為真實及準確。

CLIENT SIGNATURE 客戶簽署 _____

AE SIGNATURE 業務主任簽署 _____

APPROVED BY:

Branch Manager Signature	
Team Head Signature	
Risk Management Signature	
CEO Signature	

AE Name & Code _____
 Tel / Ext. No. _____

FOR OFFICE USE ONLY

PAYMENT			HEXAGON				VOUCHER		REVIEWED BY
SIGNATURE VERIFICATION	INPUTTED BY	CHECKED BY	INPUTTED BY	CHECKED BY	APPROVED BY (1 ST)	APPROVED BY (2 ND)	INPUTTED BY	CHECKED BY	HEAD OF SETTLEMENT

* Remarks: IBS sub a/c no. 0006 for Stock Options A/C