PHYSICAL SCRIP WITHDRAWAL AUTHORIZATION LETTER (USE ONE TIME ONLY) 提取實體股票授權書 (只限使用一次)

To : CHAOSHANG SECURITIES LIMITED

致:潮商證券有限公司

Address: Room 2206-2210, China Resources Building, 26 Harbour Road, Wan Chai H.K

地址: 香港灣仔港灣道26號華潤大廈2206-2210室

Dear Sir / Madam 敬啓者·		
Re:ClientAccount No. 有關客戶帳戶號碼:	("Account 帳戶")	
I/We,hereby authorize the following pe (DD/MM/YYYY). 本人/吾等授權	erson ("Authorized Person") to withdraw the physical scrip on 下列人士(" 獲授權人士 ")·於以上日期代表本人/吾等提取實體股票:	
Stock No.	Quantity	
股票代號:	股票數量:	
Name	Passport / ID Card No.	
姓名:	護照/身份証號碼:	
Contact No.	Please provide I.D proof of ("Authorized Person")	
聯絡電話:	請提供(" 獲授權人士 ")的身份證明文件	
Securities and Futures Ordinance (Cap 571). 本人/ 吾等確認獲授權人士並非證券及期貨條例(章號 571) 所定義之持將 I/We confirm that the Authorized Person is not ChaoShang Securities Lir 本人/ 吾等確認獲授權人士並不是潮商證券有限公司,或任何受僱於潮商語 I/We confirm that this Authorization is only executed for the above tran 本人/ 吾等確認此授權只適用於是次交易。	mited or any person employed by ChaoShang Securities Limited. 證券有限公司的人士。	
Yours faithfully 此致.		
Signature of account holder (ALL joint account holders are required to sign)	帳戶持有人簽署(所有聯名帳戶持有人均須簽署)	
Client Name 客戶姓名:		
Client Account No. 客戶帳戶號碼:		
Date 日期:		

For Internal Use Only 只供內部填寫				
Signature Verification CS	Signature Verification ST	Approved By R.O.	Approved by Compliance	Approved By Director