

# 致 To: 大唐資本證券有限公司 Grand Capital Securities Limited

地址: 香港中環威靈頓街1號荊威廣場21樓  
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## 證券交收指示 Securities Settlement Instruction

Account Name 賬戶名稱: \_\_\_\_\_

Account Number 賬戶號碼: \_\_\_\_\_

<input type="checkbox"/> S.I. <input type="checkbox"/> I.S.I.	Please RECEIVE the following securities from the counterparty for my/our above account. 請將下列證券存入本人/吾等上述證券賬戶
<input type="checkbox"/> S.I. <input type="checkbox"/> I.S.I.	Please DELIVER the following securities from my/our above account to the counterparty. 請從本人/吾等上述證券賬戶交付證券

### Grand Capital Contact Details 大唐資本聯絡

CCASS participant ID 中央結算編號: <b>802181</b>	Contact 聯絡: Settlement Dept. Tel.: (852) 3891 9803 E-mail: <a href="mailto:settlement@grandch.com">settlement@grandch.com</a>
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### Details for Settlement Instruction 交收指示資料

Name of Counter-party 交收對手名稱:			CCASS Participant ID 中央結算編號:		
Contact Person 聯絡人姓名:			Settlement Date 交收日期:		
Contact Number 聯絡人電話:					
Stock Code 股票編號	Name of Stock 股票名稱	No. of Share(s) 股數	*Payment Instruction 付款方法		Amount(HKD) 金額(港幣)
			<input type="checkbox"/> DVP	<input type="checkbox"/> FOP	
			<input type="checkbox"/> DVP	<input type="checkbox"/> FOP	
			<input type="checkbox"/> DVP	<input type="checkbox"/> FOP	
			<input type="checkbox"/> DVP	<input type="checkbox"/> FOP	
			<input type="checkbox"/> DVP	<input type="checkbox"/> FOP	
			<input type="checkbox"/> DVP	<input type="checkbox"/> FOP	

\* Please tick ("v") in the applicable box(es) 請於適當格內填上 "v" 號  
**DVP = Delivery Versus Payment 貨銀對付, FOP = Free of Payment 無需付款**

Remarks 備註:

I/We declare that the transfer of the above-mentioned securities involve(s) no change of beneficial ownership. 本人/吾等聲明就上述有關證券的實益擁有權並沒有因進行本交收指示而產生變動。

Please debit any cost and expense in respect to the settlement instruction from my/our account 請於本人/吾等之證券帳戶中扣除一切開支。

\_\_\_\_\_ 賬戶持有人/授權人士簽署

Signed by account holder/authorized person

S.V

AE confirmed and signed. 經紀人  
確認及簽署:

Date 日期:

For Internal Use Only			
Front Office		Back Office	
Prepared By:	Approved By:	Inputted By:	Checked By: