

根據《證券及期貨條例》下的持牌法團(CE 編號 AXT242)及香港聯合交易所有限公司參與者 Licensed Corporation under the Securities & Futures Ordinance (CE No. AXT242) and Exchange Participant of the Stock Exchange of Hong Kong Limited

香港灣仔港灣道18號中環廣場9樓905室 MAGIC COMPASS SECURITIES LIMITED Unit 905, 9/F, Central Plaza, 18 Harbour Road, Wan Chai, Hong Kong. 電話Tel: (852) 3575 8870 傳真Fax: (852) 3753 5314

www.magic compass sec.com

摩石證券有限公司

CE.:AXT242 Exchange Participant ID:01935 Broker No.:4430

Settlement Instruction Form – Hong Kong Securities 交收指示表格 - 香港證券

Account Information 帳戶資料						
Account Number 證券帳戶號碼						
Account Name 證券帳戶名稱						
Instruction and Settlement Details 指示及交收詳情 (Please tick in the appropriate box. 請在合適的方格內"□"打上√號)						
□ <u>Receive</u> the following securities from the counterparty for my/our above account.						
Name of Counterparty 交易對手方名稱(Note 1 註)			Counterpart ID No. 交易對手方編號			
Contact Person 聯絡人			Phone No. 聯絡電話			
Transfer with no change of Beneficiary Owner 轉移時不改變股權持有人: □ Confirmed 確認 □ Not Confirmed 不確認						
Stock Code / ISIN No. 股票代號 / ISIN 編號	Name of Stock 股票名稱	No. of Share(s) 股票數量	FOP無須付款(Note 2 註) /DVP貨銀對付(Note 3 註)	Amount HKD 港幣金額 (Note 4 註)		
			□FOP / □DVP			
			□FOP / □DVP			
			□FOP / □DVP			
			□FOP / □DVP			
Please debit the captioned account for any costs or charges so incurred. 請在我/我們之證券帳戶中扣除一切開支.						
Client Signature(s) / Authorized Signature(s) with company chop if applicable. (Note 5 註) 帳戶持有人簽署 / 受權簽署 / 公司蓋章 (若適用)						
Date 日期						
Please fill out the S.I. form and return it to the following email address: settlement@magiccompasssec.com						

FOR OFFICE USE ONLY 公司專用						
SI Fee 交收費用: HK\$						
AE / Staff (Name & Signature)	Verified by (Name & Signature)	Input by (Name & Signature)	Approved By (Name & Signature)			
Name:	Name:	Name:	Name:			



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Notes for Completion of SI Request

交收指示填寫須知

Note 附註

- 1. Please fill in the full name of counterparty, this box must be filled in. 請填上交易對手之全名,此空格必需填寫。
- Please tick the box in the event of receiving/delivering securities "free of payment".
 如接收/提出證券無須付款,請填上√號。
- 3. Please tick the box in the event of receiving/delivering securities against payment. 如接收/提出證券需付予款項,請填上 $\sqrt{ }$ 號。
- 4. This blank must be filled in amount if Note 4 has been marked with √. 如附註 4 已填上 √號,請在此項填上金額。
- 5. This form must be signed by securities account holder(s). A form which is not properly signed will be rejected. 本表格必需由股票戶口客戶簽署,本公司不接納未簽妥之表格。

Important Note 重要附註

1. Please fill out our S.I. form and return it to us. Besides, please fill out the S.I. form provided by counterparty and return it to the counterparty promptly.

請填妥本公司之交收指示表格,並交回本公司。同時,請填妥交收對手提供之交收指示表格,並即交回交收對手。

Counterparty information of MAGIC COMPASS SECURITIES LIMITED.
 摩石證券有限公司之參與者資料。

Name of Counterparty:	MAGIC COMPASS SECURITIES LIMITED 摩石證券有限公司		
Counterparty ID	B01935		
Contact Person	Settlement Department		
Telephone No.	3575 8871		