

SECURITIES SETTLEMENT INSTRUCTION FORM

To: Core Capital Securities Limited

Account Name: _____

Account No.: _____

Please tick the appropriate box.

<input type="checkbox"/> Please receive the following securities for my / our above securities account	
<input type="checkbox"/> Please deliver the following securities from my / our above securities account	
Core Capital Securities Limited Securities Instruction Details:	
CCASS No.: B02112	Contact Person: Settlement Department
Contact Tel No: (852) 2287 9130	

Via Settlement System to effect the settlement in accordance with the details as follows :	
Name of Counter-party	
Counter-party SWIFT / BIC Code / CCASS / Euroclear / Clearstream No.	Settlement Date
Counter-party Contact Person Name	Counter-party Contact No.
Customer A/C Name In Counter-party	Customer A/C No. In Counter-party

Market: ☐ H.K. ☐ U.S. ☐ China ☐ Other: _____

Stock / ISIN Code	Stock Name	Quantity	Method of Payment		Amount (HKD / USD / CNY)
			<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	
*DVP = Delivery Versus Payment *FOP = Free of Payment					Total (HKD / USD / CNY)

*Please debit the captioned account for any costs or charges so incurred.

*Settlement Instruction Service Time: business days 9:00 AM - 12:00 PM Hong Kong time. Instructions received after 12:00 PM Hong Kong time will be processed on the next business day.

*SI fees applies for stock withdrawal.

☐ I/We declare that the transfer of the above securities involves no change in beneficial ownership.

☐ I/We hereby agree to indemnify Core Capital Securities Limited against all losses and liabilities which may be incurred by reason of Core Capital Securities Limited acting in accordance with my/our instruction set out above.

Authorized Signature(s)

S.V.

Client or Director / Authorized Signature (with company chop)

Date

For Internal Use Only

Ack. by CS/AE:	Risk Controlled by:	Compliance by:	Authorized by R.O. / Director:
Inputted by Settlement:	Checked by Settlement:	Checked by acct.:	Handling Fee: