



Leeds Securities Investment Limited

競富證券金融有限公司

證監會中央編號 CE No. BMS480

Unit 2903C-05,29/F, The Centrium, 60 Wyndham Street, Central, Hong Kong
香港中環雲咸街 60 號中央廣場 29 樓 2903C-05 室
Tel 電話: (852) 3106 2213
Fax 傳真: (852) 3106 0001

證券實貨提取指示

賬戶姓名:		賬戶號碼:		聯絡電話:	
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請閣下將已填妥的表格交回本公司交收部。傳真: (852) 3106 0001 / 電郵: cs@leeds.hk

股票代號	股票名稱	股票號碼 (只供職員填寫)	股份數目
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			

提貨費用合共: HK\$ _____

客戶簽署 (如屬公司客戶請連印章)

日期: _____

閣下或授權之第三者代表, 可親臨本公司提取實貨。授權代表需出示本授權書, 閣下願就有關指示或委託第三者代取股票承擔一切後果及損失。

本人現授權下列人士代表本人收取股票		茲收到上列股票
授權人姓名:		
授權人身份證號碼:		
	客戶簽署 (如屬公司客戶請連印章)	客戶/授權人簽收 (如屬公司客戶請連印章)

* 當閣下所指示提取之股票準備妥當, 本公司將以電話通知閣下前往本公司提取。客戶必須在下達提取實物股票指示日起一星期內親臨或授權第三者到本公司領取股票實貨, 如客戶未能在指定時間內領取股票, 本公司將會把有關之股票退回中央結算系統證券存管處, 當客戶再次提取股票時必須再次填寫本表格和支付實物股票提取費用。

For Officer Use Only:

AE / CS:	Signature		Approval	CCASS		System	
	Verified by:	Checked by:		Inputted by:	Checked by:	Inputted by:	Checked by:



PHYSICAL SCRIP WITHDRAWAL INSTRUCTION

Client Name:		Account No.:		Phone No. :	
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Please return the completed and signed form to our Settlement Dept. Fax: (852) 3106 0001 / Email: cs@leeds.hk

Stock Code	Stock Name	Certificate No. (For Officer Only)	No. of Shares
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Total fee: HK\$ _____

Client Signature (with company chop if applicable)

Date: _____

Client or authorized person can collect shares in person at our Company. Authorized person shall bring with this original authorized letter. Client understands and accepts the risk to authorize the third party to withdraw the following physical scrips.

I / We authorize the following person to collect shares		I / We hereby confirmed that the above-mentioned shares were collected.
Name of Authorized Person:	_____ Client Signature (with company chop if applicable)	
ID No. of Authorized Person:		
		_____ Client Signature/authorized person (with company chop if applicable)

* Once the requested physical scrips instruction is prepared, the Company will coantact client via phone to notice client when to come and collect the physical scrips. The client or authorized person must collect the physical scrips in person **within one week** since the date which instrcution was made. **Otherwise, the Company will return the physical scrips to CCASS. Please be noted that a new instrcution with fees shall be placed for any re-arrangement of the physical scrip withdrawal.**

For Officer Use Only:

AE / CS:	Signature		Approval	CCASS		System	
	Verified by:	Checked by:		Inputted by:	Checked by:	Inputted by:	Checked by: