富昌證券
FULBRIGHT SECURITIES

Fulbright Securities Limited
富昌證券有限公司

日期	日/月/年

Securities Settlement Instruction Form (SI and ISI) 證券交收指示表格

Please return your completed form by fax to **(852) 2180 9168,** or by mail to **Settlement Department,** Unit 1101, 11/F, Nexxus Building, 41 Connaught Road Central, H.K., 請將已填妥的表格傳真至**(852) 2180 9168**或郵寄至香港中環干諾道中41號盈置大廈11樓1101室交收部。

Notev註 ：
1 Please tick where appropriate 請於適當處加上☑號。
2 Instructions for same day settlement must reach Settlement Dept.,**before 12:00a.m**. on the settlement day.
如欲即日完成交收程序，務必於交收當日**上午十二時前**填妥此文件並且交付交收部

☐ **RECEIVE** the following securities for my/our securities account
請安排**收取**下列證券並存入本人(等)之證券戶口

☐ **DELIVER** the following securities from my/our securities account
請由本人(等)之證券戶口**提取**下列證券並安排交付

CCASS Participant Name 中央結算名稱 ：	Fulbright Securities Limited 富昌證券有限公司	Name of Counterparty/Broker 交收對手名稱 ：	
CCASS Participant ID 中央結算編號 ：	B01673	Counterparty/Broker CCASS Participant ID 交收對手中央結算編號 ：	
Contact Person & Tel No. 聯絡人及電話號碼 ：	Ms Vickie Lo (852) 3108 8849	Counterparty/Broker Contact Person & Tel No. 交收對手聯絡人及電話號碼 ：	
Settlement Date 交收日期 ：		☐ **Deliver Against Payment** 交收款項，收取/交付證券。 ☐ **Free of Payment** 不需交收款項，只收取/交付證券。	

Stock Code 股票號碼	Stock Name 股票名稱	Number of Shares 股份數目	Settlement Amount (HKD) 交收金額 (港幣)

Client's Signature 客戶簽署: _____
(With Company Chop, if any / 如屬公司客戶請連印章)

Client Name 客戶名稱:_____

Account No. 戶口號碼: _____

Contact No. 聯絡電話: _____

Signature verified by:	CCASS instruction inputted by :	CCASS instruction authorized by:	Settlement Amount authorized by :