

Unit 1804, 181F, Far East Finance Centre, 16 Harcourt Road, Admiralty, Hong Kong 香港金鐘夏慤道16號遠東金融中心18樓1804室 Customer Service Hotline 客戶服務熱線: (852) 3741 8000 Fax 傅真:(852) 2530 4054 Email <u>電郵:cs@minervasec.hk</u>

Website 網址: www.minervasec.hk

FUND WITHDRAWAL FORM 資金提取申請書					
Account Number: 賬戶號碼:	Account Name: 賬戶名稱:				
Withdrawal Date:		Withdrawal Amount:			
提款日期:		提款金額:			
Please put a ✓in the appropriate box. 請在合適方格內加✓號	0				
Fund Deposit to: 資金存入至:					
Domestic Transfer 本地匯款					
□ the Bank Account which designed in the Account Opening Fo本人/吾等在開戶表格內指定的銀行賬戶;或	orm; or				
□ * the following Bank Account under my/our own name. * 以下本人/吾等所持有的銀行賬戶。					
Bank Name: 銀行名稱:					
Account No.: 賬戶號碼:					
Account Holder Name: 賬戶持有人名稱:					
Remarks: 備註:					
Oversea Transfer 海外匯款					
Bank Name: 銀行名稱:					
Account No.: 賬戶號碼:					
Bank Address: 銀行地址:					
SWIFT Code: 銀行國際代碼:					
Correspondent Bank: 中轉銀行:					
Correspondent Bank SWIFT Code: 中轉銀行之銀行國際代碼:					
Remarks: 備註:					
my/our account for the bank charges and your company charg above. Your Company will not be liable for any loss incurred.	es (if applicable). And I/We an	our account and fund transfer for the above amount and debit n/are willing to assume full responsibility for my/our instruction 期间的 1. 计公本 / 工等之限后内扣除同等數日之對頂及			
所有銀行費用和貴公司之手續費(如適用)。本人/吾等願意	對上述要求作出一切承擔。而	縣面額如上,並從本人/吾等之賬戶內扣除同等數目之款項及 i貴公司則無需負任何責任。			
Note: 註:					
- If MHFS receives the "Fund Withdrawal Form" before 11:0 Withdrawal Form" received after 11:00 am will be handle	d on the next business day. 《同一工作日處理。所有上午1	will be handled on the same business day. Otherwise, "Fund 1:00 後收到的「資金提取申請書」將於下一個工作日辦理。			
	uments, Client(s) are requested	to provide bank account proof which can show the bank account			

number and Name of Account holder (e.g. copy of first page of bankbook, copy of ATM card etc). 存入銀行賬戶與開戶文件不同,客戶必須提供銀行賬戶之證明,而該證明須顯示賬戶號碼及賬戶持有人名稱(例如:銀行存摺的第一頁副本或提款卡副本。)

Client Signature (with Company Chop, if applicable)客戶簽署(公司蓋章,如適用)	Acknowledged / Confirmed by AE/CS: 經紀或客戶主任確認 (Signature 簽署)	AE/CS Name: 經紀名稱:
		AE Code: 經紀編號:
		Telephone of AE/CS: 經紀或客戶主任電話:
Date: 日期:		Recording time: 錄音時間:

For Official Use Only 只供本公司使用						
Signature Verified By/ Approved By (RO) Recording Checked by		Transferred Amount	System input by (Account Dept.)			
		Charge	Checked By (Account Dept.)			