

提款指示 Withdrawal Instruction

請將已填妥之表格電郵至 cs@conrad-is.com.hk 或傳真至(852) 2323 1661. Please complete and return the completed form by email cs@conrad-is.com.hk or fax to (852) 2323 1661.

客戶號碼 Account No.	客戶名稱 Client Name
提取金額 (HK\$) Withdrawal Amount (HK\$)	日期 Date
收款人名稱必須與收款帳戶持有人名稱相同 Beneficiary Name must match with Account Holder's name	
請勾選以下其中一種方法 Please Select One	
<input type="checkbox"/>	劃線支票 Issue Crossed Cheque (只適用於本地客戶 only applicable for local client)
<input type="checkbox"/>	電匯方式 Telegraphic Transfer (適用於收款銀行為中國內地或海外銀行 only applicable for the receiving bank is an overseas bank or bank in Mainland China) **HKD\$300 手續費 handling charges**
銀行名稱 Bank Name	
銀行戶口號碼 Account Number	
銀行賬戶名稱 Account Name	
銀行地址 Bank Address	
Bank Swift Code 收款銀行電匯代碼	
*銀行手續費扣除方式 Bank Charges Deduction Method	<input type="checkbox"/> 從該筆提款扣除 Deducted from Withdrawal Amount <input type="checkbox"/> 從證券戶口扣除 Deducted from Securities Account

本人/吾等同意及明白貴公司需要時間處理以上之指示並且保留權利拒絕接受本人/吾等的指示，並且本人/吾等將會承擔可能因此轉款，而引致之爭議、損失、責任及有關風險。本人/吾等謹此聲明所轉帳的款項及轉款的目的並不涉及恐怖分子集資活動；從販毒所得資金；及/或組織及嚴重罪行的得益。 I/We agree and understand that your Company needs time to process my/our instruction and reserves the rights to reject my/our withdrawal instruction, and I/we shall wholly be responsible for any disputes, losses, liabilities and the relevant risks, which may arise from the fund transfer. I/We hereby confirm that the funds to be transferred and the purpose of transfer are not involved in terrorist financing activities, proceeds of drug trafficking and/or proceeds of organized and serious crimes.

Client's /AE Signature(s) and Company Chop (if applicable)
客戶/經紀簽署及公司印章(如適用)

Notice by phone 經電話通知：
Handled by 處理人：
Ext.內線：
Date & Time 日期及時間：

For Office Use Only				
S.V by	Account	Approved By	Input By	Checked By