

Please send by email or by post, Address: 29/F, 100 Queen's Road Central, Hong Kong

請填妥表格發送/ 交至客服部, 電郵: cs@dfzq.com.hk; 地址: 香港中環皇后大道中 100 號 100QRC 29/F

Cut-Off Time 截止處理時間: 2:00PM

Settlement Instruction Form 交收指示表格

 HK Market/ Shanghai A Market/Shenzhen A Market
香港股票市場 / 滬港通上海 A 股 / 深港通深圳 A 股

CCASS ID: B01900

Contact No 聯絡電話: 35191104

Email 電郵: opts-settlement@dfzq.com.hk

Client Name 客戶名稱 : _____ Ref. No. 編號 : _____
Client No. 客戶號碼 : _____ Date 日期 : _____

Please *tick as appropriate 請在正確選項的方格中加剔號

 Deliver to counterparty 請轉出到下列交易對手 **Receive** from counterparty 請從交易對手收取
 無需付款 Free of Payment 貨銀對付 Deliver Against Payment
Amount (DVP/RVP) 金額 : _____No Change of Beneficiary Owner 沒有變更實益擁有人 Confirmed 確認 Not Confirmed 不確認

Settlement Date / Value Date 交收日: _____

Stock Code/ ISIN 股票號碼	Stock Name 股票名稱	Quantity 股數	職員專用 For Office Use Only	
			Ref. No.	Remark

Counterparty Details 對手詳情

Counterparty Name 對手方名稱:		Please settle this instruction with my personal investor account in CCASS 有關的交收將以本人在中央結算所所開設的個人投資者戶口為對手 CCASS No.: [_____]
CCASS ID./ Clearing No. 對手方編號:		
Client A/C No. 於對手方的帳號:		
Contact Person 聯絡人:	Contact No./ Email 聯絡方式:	
Remarks 備註:		

S.V

客戶簽署(請用留存本公司之印鑒簽署) Client's Signature (please use signature(s) Chop(s) file with the Company)

Office Use Only: <input type="checkbox"/> 港股 BCAN YES <input type="checkbox"/> A 股 BCAN YES <input type="checkbox"/> RL1*			CP Confirmation [Date, Time & Ext./ Remarks]
CS/AE/RM	FO Approval*	[LCD]*	[Ops] Maker & Checker: