



# 雅利多證券

ARISTO SECURITIES LIMITED

致：**雅利多證券有限公司 (參與者編號：B01974) – 交收部**  
 To：**Aristo Securities Limited (Participant ID: B01974) – Settlement Department**  
 地址：**香港灣仔皇后大道東 183 號合和中心 25 樓 2502 室**  
 Address：**Room 2502, 25/F., Hopewell Centre, 183 Queen's Road East, Wanchai, Hong Kong**  
 電話 Tel.：**(852) 3622 1770**  
 傳真 Fax：**(852) 3622 1488**

### 提款表格

### Fund Withdrawal Form

請在本人下列之戶口提取款項 Please withdraw fund from my account stated as below:

賬戶號碼 Account No.: \_\_\_\_\_ 客戶名稱 Client Name: \_\_\_\_\_

貨幣 Currency :  港幣 HKD  人民幣 CNY  美元 USD

金額 Amount : \_\_\_\_\_

### 付款方法 Payment methods:

1.	<input type="checkbox"/> 支票 Cheque	<input type="checkbox"/> 存入本人在客戶開戶表格內所提供的銀行戶口； 或 Deposit to my bank account as provided in the Account Opening Form ; <b>OR</b> <input type="checkbox"/> 親身前往 貴公司提取劃線支票一張 A crossed cheque to be collected by myself at your office
2.	<input type="checkbox"/> *本地銀行轉賬，到本人在客戶開戶表格內所提供的銀行戶口 Local Bank Transfer, to my bank account as provided in the Account Opening Form	
3.	<input type="checkbox"/> *匯款往 <b>非本地銀行</b> Remittance to <b>Non-local Banks</b> (請提供相關銀行證明 Please provide relevant bank proof) (人民幣匯款往中國內地除外, except CNY Remittance to Mainland China)	

請將銀行費用 Please deduct the bank charges from:  從賬戶餘額扣除 the account balances  從此筆提款中扣除 the transfer amount

銀行名稱 Bank Name : \_\_\_\_\_  
 銀行戶口名稱 Bank Account Name : \_\_\_\_\_  
 銀行戶口號碼 Bank Account No. : \_\_\_\_\_  
 銀行國際代碼 Swift code : \_\_\_\_\_  
 銀行地址 Bank Address : \_\_\_\_\_  
 附註 Remarks : \_\_\_\_\_

\*銀行轉賬及匯款收費：港幣 100 元，另加銀行收費 (費用將從賬戶餘額扣除)  
 Bank Transfer and Remittance Charges : HKD100 plus bank charges (Fees would be deducted from the account balance)

本人同意及明白 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的指示，並且本人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。本人謹此聲明所轉賬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 agree and understand that your Company needs time to process my instruction and reserves the rights to reject my withdrawal instruction, and I shall be fully responsible for any disputes, losses, liabilities and the relevant risks, which may arise from the fund transfer. I 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.

客戶簽名 Authorized Signature(s)  
 (如屬公司客戶請連印章 for corporate, with Company chop)

日期 Date

\*\*\*\*\*此部份由本公司填寫 For Office Use Only\*\*\*\*\*

製作 Prepared by	簽署查核 Signature Checked by	批准 Approved by
日期 Date:	日期 Date:	日期 Date: