

Change of Account Information Form

更改帐户资料表格

To:

- Southwest Securities (HK) Brokerage Limited 西证(香港)证券经纪有限公司
 Southwest Securities (HK) Futures Limited 西证(香港)期货有限公司
 Southwest Securities (HK) Asset Management (HK) Limited 西证(香港)资产管理有限公司
 Southwest Securities (HK) Wealth Management Limited 西证(香港)财富管理有限公司

Please post or submit this form to Customer Services Department at 14/F., One Hysan Avenue, Causeway Bay, Hong Kong. 请邮寄或递交此表格至香港铜锣湾希慎道壹号 14 楼 客户服务部。

ACCOUNT NAME 客户姓名 : _____

ACCOUNT NUMBER 户口号码 : _____

EFFECTIVE DATE 生效日期 : _____

Details of Changes Required 所需更改资料 (Complete only those details to be changed 只需填写所需更改资料)

| |
|---|
| A. Personal Data 个人资料 |
| Change of Account Name 更改客户姓名 (Please provide the supporting document. 请提供相关证明) Chinese Surname 中文姓氏: _____ Chinese Given Name 中文名字: _____ English Surname 英文姓氏: _____ English Given Name 英文名字: _____ Add or change of Telephone Number/Email Address 新增或更改电话号码/电邮地址 Residential 住宅: (_____) _____ Office 办事处: (_____) _____ Mobile Phone 手提电话: (_____) _____ E-mail Address 电邮地址: _____ Change of two-factor authentication 更改双重认证验证码收取方式 : <input type="checkbox"/> SMS <input type="checkbox"/> Email *Designated mobile phone or email for 2FA 指定收取双重验证码之手提电话或电邮信箱: _____ |
| B. Address 地址 |
| New Address 新地址资料 *Please provide resident address proof (issued within 3 months) *请提供地址证明文件(最近三个月内发出的) Residential 地址 _____ Correspondence 通讯地址 _____ Business address 营业地址 _____ |
| C. Bank Details 银行资料 |
| Name of bank : 银行名称: _____ (Please provide the supporting document. 请提供相关证明) Account Number 帐户号码 : _____ Account type 帐户类别 : _____ |
| D. Cancel real-time quote service or Others 取消实时报价服务或其他 |
| We wish to cancel the following services and will pay for all outstanding charges. 本人/吾等取消下述服务及清付有关费用 : <input type="checkbox"/> 通达信 TONGDAXIN <input type="checkbox"/> 阿斯达克 AASTOCKS <input type="checkbox"/> 芝加哥商品交易所集团 CME Group <input type="checkbox"/> 美国洲际交易所 ICE Group 其它 : _____ |

*P.O. box is not acceptable. 不接受邮政信箱

Client Signature(s) 客户签署 : _____ Date 日期 : _____

OFFICIAL USE ONLY

| | | | |
|------------------------------------|--|--------------------------------------|---|
| Checked by : AE/Staff Signature | Signature Verified and reviewed by : Customer services Department | Approved by : Responsible Officer | Data Input by : Customer services Department |
| | | | |
| Date : | Date : | Date : | Date : |