高裕證券
Gaoyu Securities

香港上環皇后大道中 183 號中遠大廈 44 樓 4409 室
Suite 4409, 44/F COSCO Tower, 183 Queen's Road Central, Hong Kong
電話 Tel : (852) 2877 3188
傳真 Fax: (852) 2877 2088
電郵 E-mail: info@gysechk.com

提款表格
Fund Withdrawal Form

客戶名稱 Client Name	帳戶號碼 Account Number

請用正楷填寫,在適用處剔 Please complete in Block Letter, tick where appropriate

提款日期 Withdrawal Date	(DD/MM/YYYY)
提款金額 Withdrawal Amount	☐ 港幣 HKD ☐ 人民幣 RMB ☐ 美元 USD ☐ 其他 Others _____ $

提款方法 Withdrawal Channel

☐ 存款至已登記於高裕證券的銀行賬戶 Deposit to the bank account registered with Gaoyu

☐ 匯款 Remittance

☐ 支票 Cheque 自取支票 日期 Collection Date : _____

☐ 存入以下本人 / 吾等的銀行賬戶 (客戶須提供此銀行賬戶的證明，如銀行結單)

Deposit into my/our bank account stated below (client shall provide proof of the bank account, e.g. bank account statement)

收款銀行 Beneficiary Bank :	
收款人銀行賬戶名稱 Name of Beneficiary Bank Account Holder :	
收款人銀行賬戶號碼 Bank Account Number of Beneficiary :	

備註 Remarks:

1 本公司不接受提款給第三者(即不是客戶本人)。Third party payment is not acceptable to us. Beneficiary name must be the client holder.

2 本公司提款截數時間為上午 11:00 時，逾時將順延至下一個工作天處理。The withdrawal instruction cut-off time is 11:00 am of every business day. If any valid instruction is received by our company on or after 11:00 am, the withdrawal instruction will be processed on the next business date.

S.V

客戶簽署 Client's Signature(s)

日期 Date :

只供電話錄音申請使用 For Application Via Phone Only	
AE/Staff Name	:
Recording Phone No.	:
Recording Date	:
Recording Time	:

For Internal Use Only 內部專用

AE	*Input by*	*Checked by*	*Approved by*
(DD/MM/YYYY)	(DD/MM/YYYY)	(DD/MM/YYYY)	(DD/MM/YYYY)