



更新客戶資料申請表

Change of Contact Information Application Form

請填妥以下表格,簽署後電郵至 cs.sec@galaxytreasure.com 或傳真至 (852) 3628 3364 (須後補正本) Please complete the form with signature and return it either by email to cs.sec@galaxytreasure.com or fax to (852) 3628 3364 (Original copy is required)

關於本人/吾等所開設的賬戶,本人/吾等人同意且確認以下賬戶資料更改 (請用英文或中文拼音填 寫): In connection with my/our trading account carried by Galaxy Treasure Securities Group Limited, the undersigned hereby ratifies and confirms that the following changes have been made in regards to his account(s):

安氏姿妙 (Client Information						
客戶資料 /Client Information						
賬號 Account Number:			賬戶名稱 			
Account Number •		Name on Account	Name on Account:			
身份證或護照號碼(註1) 如更改身份證明文件的名字		名字 出生日期(日/月/年	出生日期(日/月/年)			
/號 碼,請提供正本或經核實有關證明文件副本		Date of Birth:	Date of Birth:			
ID/Passport No. : If change in Na		r				
on the Identification document, please						
original or a certified true copy of the	relevant docum	ent.				
住宅地址(註2)請附地址證明文件副本(最近3	個月)如電費/電話	5單等(個人)/商業登 <mark>記證認證</mark>	副 <mark>本或公司</mark> 記	主冊處文件認證副本(公司)		
Home Address: Please provide supporting			<mark>ctric/ phon</mark> e l	bills etc.(personal)/Certified true		
copy of Business Registration or Company Regis	<mark>stry's docu</mark> ment (Co	orporate)				
(), -> =>-/		fe II. Is end	- 1414 H Fr	ne.		
住宅電話號碼	住宅傳真號碼		手機號碼			
Home Telephone No.:	Home F	ax No.:	Mobile No.:			
郵政編號	電郵地址					
Postal Code:	E-mail Addre	ss:				
1 ostar code	L'inuii / idaic	55 -				
	銀行資料	☐ Bank Information				
(*銀行賬戶持有人名称		人 Bank Account Holder mu		ent's own name)		
(註3)請提供銀行戶口證明文件副本,例如:銀行咭,存摺,結單。						
	ease provide a vali	d bank proof e.g. ATM card, pa	ssbook or ban	nk statement.		
銀行賬戶持有人名稱			銀行賬戶號碼			
Bank Account Holder's Name:		Bank Account Num	Bank Account Number:			
 銀行名稱	■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■	國際匯款代碼(如有)				
図りて付用 Bank Name:			SWIFT Code (If applicable):			
銀行地址 Bank Address:						
Bank Address.						
	職業 Occup	pation Information				
僱主名稱(若自僱,請填業務名稱) 職業(或業務性質) 任職年期						
		Occupation (or Type	of	Year(s) Employed		
Business): Bus		Business)				
	公司電話			<u>【</u> Ĕ		
一	区 可电动 Business Phone No.:		傳真號碼 Facsimile No.:			
公司地址	2451110551110		I acomm	- 1.0		
Business Address:						





請閣下根據最新的身份及僱傭資料回答以下問題 (請打"✔"選擇): Please answer the following questions according to your newest identification and employer information. (Please tick"✔"):				
<u> </u>				
□是Yes /□否No	閣下是否為政界人士或與政界人士有關聯之人士 Are you a politician or a politician's affiliated person?			
□是Yes /□否No	閣下僱主/自僱業務是否為處理大量現金機構,例如賭場、貨幣兌換商等 Is your employer or self-employ business an institution dealing with a large amount of cash, e.g. casino, money changer etc.			
其他 Other				

客戶簽署及公司印(註4)

Client Signature (s) & Company Chop

姓名 / 公司名稱 Name / Company Name 日期 Date:

*請刪除不適用的

Please delete the non-applicable one

註

- 1. 如更改身份證明文件的名字/號碼,請提供正本或經核實有關證明文件副本。
- 如更改住宅地址/總辦事處及註冊地址,請提供地址證明文件副本(最近3個月),如電費/電話單等(個人)/商業登記證認證副本或公司註冊 處文件認證副本(公司)。
- 3. 如更改銀行戶口資料,請提供銀行戶口證明文件副本,例如:銀行咭,存摺,結單。
- 4. 須與原留印鑑及其安排相符。

Remarks:

- 1. If change in Name / number on the Identification document, please provide the original or a certified true copy of the relevant document.
- 2. If change in Residential Address / Principal Place of Business / Registered Office, please provide supporting address document copies (recent 3 months), e.g. electric/phone bills etc.(personal)/Certified true copy of Business Registration or Company Registry's document (Corporate).
- 3. If change in Bank account information, please provide a valid bank proof e.g. ATM card, passbook or bank statement.
- 4. To be signed as per Specimen Signature(s) and the relevant Signing Arrangement on our file.

本公司專用 Official Use Only:

核對簽名: Signature Verified by:	核對及操作: Checked & Processed by:	批准: Approved by: