





Leeds Securities Investment Limited

競富證券金融有限公司

證監會中央編號 CE No. BMS480

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Tel 電話: (852) 3106 2213  
Fax 傳真: (852) 3106 0001

CHANGE OF ACCOUNT INFORMATION

Client Name:		Account No.:		Phone No.:	
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Account for Information Update:

<input type="checkbox"/> For All Accounts	<input type="checkbox"/> For selected account:
	<input type="checkbox"/> Securities Cash <input type="checkbox"/> Securities Margin

Effective Date:

<input type="checkbox"/> Effective Immediately*	<input type="checkbox"/> From _____*	<i>*confirm with officer, and to be completed within 14 working days after confirmation.</i>
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Information Update: (Please fill for which applicable)

中文姓名: _____	ID / Passport No.: _____
English Name: _____ Mr. / Ms.	Issuing Authority: _____ Nationality: _____
<i>*Please provide effective supporting document.</i>	
<i>*Please provide new ID/Passport copy.</i>	
Address: <input type="checkbox"/> Change <input type="checkbox"/> Add	<input type="checkbox"/> Residential / Registered <input type="checkbox"/> Office / Correspondence _____ _____ <i>*Please provide a valid address proof issued within the past 3 months.</i>
Telephone No.: <input type="checkbox"/> Change <input type="checkbox"/> Add	<input type="checkbox"/> Home : _____ <input type="checkbox"/> Office : _____ <input type="checkbox"/> Mobile : _____ <input type="checkbox"/> Facsimile : _____
Email:	
Bank Account Information: <input type="checkbox"/> Change <input type="checkbox"/> Add	Bank Name : _____ Bank A/C No. : _____ <i>*Please provide supporting document.</i>
Change of Signature:	
Existing Signature: _____	New Signature: _____
Others:	

Client Signature (with Company Chop if Applicable)

For Officer Use Only:

AE / CS:	Signature		Approval	System	
	Verified by:	Checked by:		Inputted by:	Checked by: