

MANULIFE GLOBAL FUND – SAMEDAY AUTOPAY APPLICATION FORM 宏利環球基金－當日自動轉賬申請表格

NOTE 註：

- Please complete in English BLOCK LETTERS. For assistance, please call: (852) 2108 1110. 請以英文正楷填寫本表格。如需協助，請致電：(852) 2108 1110。
- Please return this completed form to **Manulife Asset Management (Hong Kong) Limited**, 23/F., Manulife Tower, One Bay East, 83 Hoi Bun Road, Kwun Tong, Kowloon, Hong Kong. Instruction by facsimile is not accepted. 請將已填妥的表格交回宏利資產管理(香港)有限公司，香港九龍觀塘海濱道83號宏利大樓23樓。恕不接受傳真指示。
- Sameday autopay is available only for investors with a HK Dollar bank account at **HSBC** or **Hang Seng Bank** and normally takes about 2 weeks to set up. 當日自動轉賬只接受持有香港上海滙豐銀行或恒生銀行港幣戶口之投資者申請，而大概需時兩星期設立。
- Change of sameday autopay bank account normally takes effect within 10 business days after receipt of the application. Please ensure that the sameday autopay bank account has sufficient debit limit and funds for payment of subscriptions. 更改當日自動轉賬銀行戶口通常在收到申請後的十個營業日內生效。請確保當日自動轉賬銀行帳戶中有足夠的支賬限額及資金以支付有關的認購款項。
- Please ensure that you sign the form in the usual way that you would sign on your Bank Account. 請確保閣下在此授權書內之簽名，與銀行帳戶簽名完全相同。

SHAREHOLDER ACCOUNT INFORMATION 股東帳戶資料

Shareholder Account Number (For existing account only) 股東帳戶編號 (只適用於現有帳戶) : _____
 Account Holder's Full Name(s) 帳戶持有人全名 _____ HKID/Passport Number 香港身份證 / 護照號碼 _____

1. _____ 2. _____ 1. _____ 2. _____
 Are you an existing investor in Manulife Global Fund? Yes No Are you changing the sameday autopay bank account? Yes No
 閣下現時是否宏利環球基金的投資者? 是 否 閣下是否更改當日自動轉賬銀行戶口? 是 否
 (Note 4) (註 4)

Contact Number 聯絡電話號碼: _____ E-mail Address 電郵地址: _____ Fax Number 傳真號碼: _____

DIRECT DEBIT AUTHORISATION 直接付款授權書

Name of party to be credited (The Beneficiary)
 收款之一方(受益人)
CITIBANK NA HK BRANCH – MGF A/C

My/Our Bank Name and Branch
 本人 / 吾等之銀行及分行名稱
HSBC 香港上海滙豐銀行

OR
或
Hang Seng Bank 恒生銀行

My/Our Name as recorded on Statement/Passbook
 本人 / 吾等在結單或存摺上之名稱

My/Our Address as recorded on Statement/Passbook
 本人 / 吾等在結單或存摺上之地址

Bank No. 銀行編號 0 0 4	Branch No. 分行編號 8 0 8	Account No. to be credited 賬戶號碼 3 8 7 1 1 2 0 0 1
Bank No. 銀行編號 0 0 4	Branch No. 分行編號 [] [] []	My/Our Account No. 賬戶號碼 [] [] [] [] [] [] [] [] [] []
Bank No. 銀行編號 0 2 4	Branch No. 分行編號 [] [] []	My/Our Account No. 賬戶號碼 [] [] [] [] [] [] [] [] [] []

Telephone No.
電話號碼

Maximum Limit for Each Payment
 每次最高付款限額
 Note 註: If blank, the debtor's bank will set as "unlimited". 如無填寫，付款銀行會將轉賬限額設為「不设上限」。
HKD 港幣

Expiry Date (DD/MM/YYYY)
 到期日(日/月/年)
 Note 註: If blank, this authorization shall have effect until further notice and Expiry Date should be greater than 3 months. 如無填寫，此直接付款授權書將無限期有效至另行通知及到期日必須大於三個月。

ID number of Account holder(s)
 戶口持有人的身份證件號碼
 (All holders should complete)
 (所有持有人均須填寫)
 1. _____
 2. _____

ID Type*
 身份證件類別*
 1. _____
 2. _____

*I =HKID 香港身份證 P =Passport 護照 B =Business Registration 商業登記證
 C =Certificate of Incorporation 公司註冊證書 X =Others, please specify 其他，請註明

Declaration 聲明

- I/We hereby authorise my/our above named Bank to effect transfers from my/our account to that of the above named beneficiary in accordance with such instructions as my/our Bank may receive from the beneficiary and/or its banker and/or its banker's correspondent from time to time provided always that the amount of any one such transfer shall not exceed the limit indicated above. 本人(等)現授權本人(等)的上述銀行，(根據收款人或其往來銀行及/或代理行不時給予本人(等)銀行的指示)自本人(等)的戶口內轉賬予上述收款人。惟每次轉賬金額不得超過以上指定的限額。
- I/We agree that my/our Bank shall not be obliged to ascertain whether or not notice of any such transfer has been given to me/us. 本人(等)同意本人(等)的銀行無須證實該等轉賬通知是否已交予本人(等)。
- I/We jointly and severally accept full responsibility for any overdraft (or increase in existing overdraft) on my/our account which may arise as a result of any such transfer(s). 如因該等轉賬而令本人(等)的戶口出現透支(或令現時的透支增加)，本人(等)願共同及個別承擔全部責任。
- I/We agree that should there be insufficient funds in my/our account to meet any transfer hereby authorised, my/our Bank shall be entitled, in its discretion, not to effect such transfer in which event the Bank may make the usual charge and that it may cancel this authorisation at any time on one week's written notice. 本人(等)同意如本人(等)的戶口並無足夠款項支付該等授權轉賬，本人(等)的銀行有權不予轉賬，且銀行可收取慣常的收費，並可隨時以一星期書面通知取消本授權書。
- This direct debit authorisation shall have effect until further notice or until the expiry date written above (whichever shall first occur). I/We agree that if no transaction is performed on my/our account under such authorisation for a continuous period of 30 months for HSBC account or 24 months for Hang Seng Bank account, my/our Bank reserves the right to cancel the direct debit arrangement without prior notice to me/us, even though the authorisation has not expired or there is no expiry date for the authorisation. 本直接付款授權書將繼續生效直至另行通知為止或直至上列到期日為止(以兩者中最早的日期為準)。本人(等)同意如本人(等)在香港上海滙豐銀行已設立的直接付款授權的戶口連續三十個月內或在恒生銀行已設立的直接付款授權的戶口連續二十四個月內未有根據本授權而作出過賬的紀錄，本人(等)的銀行保留權利取消本直接付款安排而毋須另行通知本人(等)，即使本授權書並未到期或未有註明授權到期日。
- I/We agree that any notice of cancellation or variation of this authorisation which I/We may give to my/our Bank shall be given at least two working days prior to the date on which such cancellation/variation is to take effect. 本人(等)同意，本人(等)取消或更改本授權書的任何通知，須於取消/更改生效日最少兩個工作天之前交予本人(等)的銀行。

My/Our Signature(s) (Note 5)
 本人 / 吾等之簽名(註5)
 X _____

Date (DD/MM/YYYY)
 日期

Office Use Only 只供內部填寫

Debtor Name (in Block Letters)
 付款人名稱(請以英文正楷填寫)

Debtor Reference
 付款人編號
 [] [] [] [] [] [] [] [] [] []

For Bank Use Only 銀行專用
 Signature Verified