

**印花稅申報及繳付程序自動化的研討會報名表**  
**Enrolment Form for Seminars on Automation of Stamp Duty Reporting and Payment**

(填妥之表格須於2010年4月19日或之前傳真至2521-7899或2868-5223)  
 (Completed form should be returned by fax to 2521-7899 or 2868-5223 on or before 19 April 2010)

致：香港交易及結算所有限公司 – 現貨市場部 (傳真號碼：2521-7899或2868-5223)  
 To : Hong Kong Exchanges & Clearing Ltd – Cash Market Department (Fax No.: 2521-7899 or 2868-5223)

**第一部份 交易所參與者資料**  
**Section I Exchange Participant Information**

|                              |                     |
|------------------------------|---------------------|
| 交易所參與者名稱<br>Participant Name | 公司編號<br>Firm ID     |
| 聯絡人<br>Contact Person        | 電話號碼<br>Contact No. |
| 電郵地址<br>Email Address        | 傳真號碼<br>Fax No.     |

**第二部份 研討會詳情**  
**Section II Details of the Seminars**

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|--|
| 日期：2010年4月26及28日<br>Date : 26 and 28 April 2010  |
| 時間：下午5時正至5時15分(登記) 下午5時15分至6時15分(研討會)<br>Time : 5:00pm – 5:15pm (Registration) 5:15pm-6:15pm (Seminar)   |
| 地點：香港中環交易廣場1座及2座1樓交易所展覽館交易所會議廳<br>Venue : The Exchange Auditorium, The Exchange Exhibition Hall, 1/F, One and Two Exchange Square, Central, HK |
| 語言：廣東話<br>Language: Cantonese  |

本公司現提名以下人士出席是次研討會：

We would like to nominate the following person(s) to attend the seminar:

| 英文或中文姓名 (請用正楷填寫)<br>Name in English or Chinese<br>(in Block Letters) | 職位<br>Position | 選擇日期(請在適當的方格內加上✓號)<br>Choice of Date (please tick ✓ the appropriate box) |      |
|--|----------------|--|------|
|  |                | 26/4   | 28/4 |
| 1.   |                |  |      |
| 2.   |                |  |      |
| 如有剩餘名額 If seats are available  |                |  |      |
| 3.   |                |  |      |

備註：除獲交易所通知外，所有報名人士均會獲分配出席研討會的名額。交易所將會於研討會前一天以電話通知不獲分配出席研討會的交易所參與者。若任何已遞交報名表之交易所參與者未能出席研討會，請盡早致電2840-3626通知交易所。

Note: Enrolments are treated as successful unless informed by the Exchange. Unsuccessful EPs will be informed by phone one day before the seminar. If any EPs which have submitted the enrolment form and cannot attend the seminar, please notify the Exchange on 2840-3626 as soon as possible.

負責人員簽署並蓋上公司印章

Responsible Officer Signature  
with Company Chop

日期

Date

: \_\_\_\_\_ : \_\_\_\_\_

負責人員名稱

Name of Responsible Officer

: \_\_\_\_\_