

THE SEHK OPTIONS CLEARING HOUSE LIMITED

Cash & Derivatives Clearing Operations
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Fax: 2868 0134
Hotline: 2211 6932

ON-BEHALF TRADE GIVE-UP/TAKE-UP REQUEST FORM

Particulars of SEOCH Participant

SEOCH Participant's Name :	DCASS Customer Code :	Broker Firm ID :
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Contact Person for This Request Form :

Name :	Tel. No. :
Position :	Fax No. :

On behalf Give-up Details

	Detail of Original Trade							Detail of Give Up Trade		
	Trade Date	Account	Series	Trade No.	Buy / Sell	Price	Quantity	Participant / Account	Quantity	Free text*
1.										
2.										
3.										

On Behalf Take-up Details

	Detail of Original Trade								Detail of Take Up Trade			
	Trade Date	Account	Series	Trade No.	GiveUp No.	Buy / Sell	Price	Quantity	Participant / Account	Quantity	O/C	Free text*
1.												
2.												
3.												

* The "Free text" field only allows a maximum of 30 characters including any spaces.

Authorised Signature(s) of Give-up SEOCH Participant

[with company chop, ONLY applicable if it forms part of your signing instruction]

Name of Signatory(ies) : _____

Authorised Signature(s) of Take-up SEOCH Participant

[with company chop, ONLY applicable if it forms part of your signing instruction]

Name of Signatory(ies) : _____

Date

FOR SEOCH USE				
VERIFIED/ DATE	APPROVED/ DATE	INPUT	INPUT DATE/ TIME	CHECKED BY/ DATE