

撤銷授權書(公司或機構專業投資者賬戶)**Revocation of Authorization Form (Corporate Account or Professional Investor (Institution) Account)**

致: 華泰(香港)期貨有限公司(簡稱“華泰(香港)期貨”)

To: Huatai (Hong Kong) Futures Limited (“Huatai (Hong Kong) Futures”)

賬戶名稱_____ (“客戶”)
Account Name (“The Client”)賬戶號碼_____
Account No.

有關上述期貨賬戶, 本公司/機構特此撤銷以下被授權人士及授權項目:

Regarding the above futures accounts, the corporate/institution hereby revokes the following Authorized Person(s) and authorized items:

撤銷獲授權人仕 Revocation of Authorized Person(s)		
獲授權人仕姓名 Authorized Person's Name	證件號碼 ID No.	撤銷授權項目 Revocation of Authorized Items
		<input type="checkbox"/> 獲授權發出交易指令 Authorized to give trade instructions <input type="checkbox"/> 獲授權發出戶口交收指令人仕(包括處理款項指令) Authorized for giving settlement instructions (including instructions for handling monies) <input type="checkbox"/> 獲授權接收及取得資料(包括帳單及追收欠款/保證金通知的接收) Authorized for receiving and obtaining Account Information (including Settlement Statement, Notice of Collection of Debts and Margin Call) <input type="checkbox"/> 其他授權, 請列明 Other authorizations, please specify
		<input type="checkbox"/> 獲授權發出交易指令 Authorized to give trade instructions <input type="checkbox"/> 獲授權發出戶口交收指令人仕(包括處理款項指令) Authorized for giving settlement instructions (including instructions for handling monies) <input type="checkbox"/> 獲授權接收及取得資料(包括帳單及追收欠款/保證金通知的接收) Authorized for receiving and obtaining Account Information (including Settlement Statement, Notice of Collection of Debts and Margin Call) <input type="checkbox"/> 其他授權, 請列明 Other authorizations, please specify
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		<input type="checkbox"/> 其他授權，請列明 Other authorizations, please specify
		<input type="checkbox"/> 獲授權發出交易指令 Authorized to give trade instructions <input type="checkbox"/> 獲授權發出戶口交收指令人仕（包括處理款項指令） Authorized for giving settlement instructions (including instructions for handling monies) <input type="checkbox"/> 獲授權接收及取得資料（包括帳單及追收欠款/保證金通知的接收） Authorized for receiving and obtaining Account Information (including Settlement Statement, Notice of Collection of Debts and Margin Call) <input type="checkbox"/> 其他授權，請列明 Other authorizations, please specify

公司/機構印章及獲授權人士簽署
Corporate/Professional
Investor (Institutional)
Signature/Seal

簽署人姓名:
Signatory Name

簽署人職銜:
Signatory Title

日期:
Date

For official use only 僅供職員填寫				
<input type="checkbox"/> Original <input type="checkbox"/> E-mail Check <input type="checkbox"/> Phone Check	Phone verified by	Phone number	Date	Time
Handle by	Compliance Approved by	RO Approved by	Input by	Checked by