

Standing Instruction for Payments

To:

Please select one company and that company is hereinafter referred to as the "Selected Company".

- | | |
|---|---|
| <input type="checkbox"/> Everbright Securities Investment Services (HK) Limited ("EBSISHK") | <input type="checkbox"/> Bright Bullion Company Limited ("BB")* |
| <input type="checkbox"/> Everbright Securities Digital Finance (HK) Limited ("EBSDFHK") | <input type="checkbox"/> CES Forex (HK) Limited ("CESFXHK") |
| <input type="checkbox"/> CES Commodities (HK) Limited ("CESCHK") | (Please tick where applicable) |

*Bright Bullion Company Limited operates under a separate brand.

A. TRADING ACCOUNT DETAILS

Trading Account No.: _____ Trading Account Holder Name: _____ ("Client")

B. DESIGNATED ACCOUNT DETAILS (MAXIMUM 2 PER TRADING ACCOUNT OF THE SELECTED COMPANY)

Add / Change / Delete (please delete as appropriate)

Standing Instruction Effective from: _____ ("Effective Date")

(1) a. Name of Bank: _____ Bank Account No.: _____

Name(s) of Bank Account Holder(s) ("Payee")* _____

b. Name of Bank: _____ Bank Account No.: _____

Name(s) of Bank Account Holder(s) ("Payee")* _____

(2) a. Name of the relevant member of EBSI: EBSISHK / EBSDFHK / CESCHK / BB / CESFXHK (Please delete as appropriate)

Name(s) of Trading Account Holder(s) ("Payee")*: _____

Trading Account No.: _____

b. Name of the relevant member of EBSI: EBSISHK / EBSDFHK / CESCHK / BB / CESFXHK (Please delete as appropriate)

Name(s) of Trading Account Holder(s) ("Payee")*: _____

Trading Account No.: _____

*Please complete Part C if Payee's name is different from the Client's name.

C. ADDITIONAL INFORMATION FOR PAYEE

| Relationship between Payee and the Client (Please tick the appropriate one below) | Document(s) required (Applicable to bank withdrawal) |
|--|---|
| For Individual account: <input type="checkbox"/> Payee is a joint account of the Client and related party(ies). The relationship [#] of the related party(ies) with the Client is:- → <input type="checkbox"/> parents <input type="checkbox"/> spouse <input type="checkbox"/> child <input type="checkbox"/> sibling | <input type="checkbox"/> Bank proof showing the relevant name and account number; and <input type="checkbox"/> Copy of ID card / passport of the Payee |
| For Joint account: <input type="checkbox"/> Payee is one of the joint account holders and the relationship [#] of the Payee with the other joint account holder(s) is:- → <input type="checkbox"/> parents <input type="checkbox"/> spouse <input type="checkbox"/> child <input type="checkbox"/> sibling | <input type="checkbox"/> Bank proof showing the relevant name and account number |
| For Corporate account: <input type="checkbox"/> Payee is the direct sole shareholder (Natural Person only)/ sole proprietor of the Client. | <input type="checkbox"/> Bank proof showing the relevant name and account number; and <input type="checkbox"/> Supporting document of the shareholding structure issued within 1 year (e.g. certificate of incumbency) |
| <u>Information of the Payee:</u> Individual name (in English): _____ (in Chinese) if any: _____ Nationality: _____ ID No. _____ Residential address: _____ | |

EBSI may request for the proof of relationship

D. CLIENT'S SIGNATURE

I/We, the undersigned Client, have read, understood and accepted the contents of this Standing Instruction including the above, Section E - Agreement & Authorization by the Client (set out overleaf) and the Important Reminder (set out overleaf).

Client's Signature(s) **: _____

Client's Name(s): _____

Date: _____

** Please sign according to the Selected Company's record.

| FOR OFFICE USE ONLY | | |
|---------------------|-------------|--------------|
| SIGNATURE VERIFIED: | ENTERED BY: | CHECKED BY : |

E. AGREEMENT & AUTHORIZATION BY THE CLIENT

- (1) (a) In consideration of the Selected Company agreeing to the terms of this Standing Instruction, I/we (i.e. the Client whose signature(s) and other particulars appear in Section D at page 1 of this Standing Instruction) hereby agree and authorize that the Selected Company may from time to time transfer any funds from my/our trading account detailed in Section A to the account(s) detailed in Section B pursuant to the instructions given by me/us or the person(s) authorized by me/us ("authorized person(s)") in accordance with EBSI's applicable procedures.
 (b) Notwithstanding the foregoing or anything to the contrary contained in this Standing Instruction, the Selected Company may in its absolute discretion and without assigning any reason therefor refuse to act on any oral or written instructions from me/us or the authorized person(s). In such event, the Selected Company will use its reasonable endeavors to notify me/us accordingly, but the Selected Company shall not in any circumstances whatsoever be liable in any way for any losses, damages, liabilities, costs or expenses suffered or incurred by me/us or any third party howsoever arising out of or in connection with any such refusal and/or omitting so to notify me/us.
- (2) I/We declare and confirm that the Payee, who is not the trading account holder, detailed in Section B above (the "Related Party") does/do not have any interest in my/our trading account detailed in Section A above and if any such Related Party has an interest in my/our said trading account, this has been previously disclosed in the account opening documentation of the Selected Company and that each instruction given by me/us or by my/our authorized person is not related directly or indirectly to money laundering, any terrorist activity or any other purpose whatsoever that is illegal or prohibited by any competent authority, either in Hong Kong or elsewhere. I/We undertake to procure and produce to the Selected Company, immediately upon demand, such information, identification and/or other documents in respect of any Related Party detailed in Section B above as may be required by the Selected Company from time to time.
- (3) This Standing Instruction is given in addition to and without prejudice to any other authority or right which the Selected Company or any member of EBSI may, now or hereafter, have in relation to the funds in the account(s) detailed in Section A and/or Section B above.
- (4) I/We hereby agree to indemnify, and to keep indemnified, the Selected Company from and against all and any losses, damages, interests, costs, expenses, actions, demands, claims and/or proceedings of whatsoever nature which the Selected Company may incur, suffer and/or sustain as a consequence of any act, transfer and/or transaction done or undertaken pursuant to or by virtue of this Standing Instruction.
- (5) This Standing Instruction may be revoked by giving the Selected Company written notice addressed to the Operations Department at the Selected Company's address specified above or such other address as may be subsequently notified to me/us by the Selected Company. My/Our notice of revocation shall take effect upon the expiry of two weeks from the date of the Selected Company's actual receipt of such notice (unless the Selected Company in its sole and absolute discretion decides otherwise) and shall not affect any act, transfer or transaction done or undertaken by the Selected Company or any member of EBSI pursuant to or by virtue of this Standing Instruction prior to such revocation taking effect.
- (6) In this Standing Instruction, unless the context requires otherwise, (i) "EBSI" means the Selected Company, China Everbright Securities International Company Limited and its subsidiaries and associated companies, and "member of EBSI" shall be construed accordingly.
- (7) In the event of inconsistencies between the Chinese and English versions of this Standing Instruction, the English version shall apply and prevail.

IMPORTANT REMINDER

Note 1: Payment from any Client's account to any director, staff or licensed representative of any member of EBSI or of any associated entity of any member of EBSI is prohibited.

FOR OFFICE USE ONLY (Only applicable if Part C is completed)

| | | | |
|--|--|-------------------|-------|
| Checked by Sales Person: | | | |
| _____ | _____ | _____ | _____ |
| Sales Person's Signature | Sales Person's Name (CE No. / Staff No.) | Team / Department | Date |
| Reviewed by Responsible Officer: | | | |
| _____ | _____ | _____ | _____ |
| Responsible Officer's Signature (or designate) | Responsible Officer's Name | Team / Department | Date |
| Compliance Comment: | | | |
| Compliance comment (if any): _____ Signature: _____ Name of AML-MIC/ MLRO (or designate): _____ Date: _____ | | | |