

**PLEASE RETURN THIS FORM TO 請將此表格交回：**

HSBC Institutional Trust Services (Asia) Limited  
 17/F Tower 2 & 3, HSBC Centre, 1 Sham Mong Road, Kowloon  
 Attn: Transfer Agency (Traditional Products)  
 Fax Number: 852-3409-2694  
 滙豐機構信託服務（亞洲）有限公司  
 香港九龍深旺道一號滙豐中心第二及三座 17 樓  
 傳真號碼: 852-3409-2694

**CHANGE OF PARTICULARS FORM  
更改資料表格**

**PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS**

**請以正楷填寫此表格**

*NOTE: This form may be submitted by facsimile provided the original follows promptly. Applicant should note, no responsibility is accepted for any loss caused as a result of non-receipt or illegibility of any request sent by facsimile or for any loss caused in respect of any action taken as a consequence of such facsimile instruction believed in good faith to have originated from properly authorized persons.*

*註項：以傳真方式申請並及後經郵寄方式提交表格正本將有助加快處理程序。申請人必須清楚了解本公司將不會承擔任何因郵寄遺失、傳真文件品質或因保障持有人而延誤處理程序所造成之損失。*

Unitholder Details 單位持有人資料					
Holder ID 持有人編號					
CIF ID (if applicable) 客戶資料編號 (如適用)					
Fund Name (if applicable) 基金名稱 (如適用)					
Name of Unitholder 單位持有人名稱	Company 公司				
	Individual or Joint Account 個人或聯名賬戶	1) Name 姓名	ID / Passport No. 身分證 / 護照號碼	2) Name 姓名	ID / Passport No. 身分證 / 護照號碼
		3) Name 姓名	ID / Passport No. 身分證 / 護照號碼	4) Name 姓名	ID / Passport No. 身分證 / 護照號碼

(1) – Change of Registered / Mailing Address 更改登記 / 郵寄地址

Registered Address (P.O. Box address will not be accepted for registration.) 登記地址 (不接受以郵政信箱地址登記)	Mailing Address (Not required only if identical to the registered address) 郵寄地址 (如與登記地址相同並無需要填寫)
_____	_____
_____	_____
_____	_____
_____	_____

(2) – Change of Contact Details 更改聯絡資料

Telephone Number 電話號碼	
Facsimile Number 傳真號碼	
E-mail Address 電郵地址	
Contact Person 聯絡人	

(3) – Change of Standing Instruction For Redemption / Distribution Payment 更改常行贖回 / 派息付款指示

Please arrange to credit proceeds by telegraphic transfer to the following account: 請安排款項電匯到以下賬戶：

Currency 貨幣

Corresponding Bank Name 往來銀行名稱

Corresponding Bank SWIFT/BIC Code 往來銀行代號

Corresponding Bank Address 往來銀行地址

Beneficiary Bank Name 收款銀行名稱

Beneficiary Bank SWIFT/BIC Code 收款銀行代碼\*

Beneficiary Bank Address 收款銀行地址

Beneficiary Bank Account Number 收款銀行賬戶號碼

Bank Account Name 銀行賬戶名稱\*\*

Bank Account Number 銀行賬戶號碼\*\*

IBAN 國際銀行帳號\*

Please provide all information above to enable timely and accurate payment.

請提供以上所有資料以便及時並準確將款項轉送至閣下賬戶。

\* BIC / SWIFT and IBAN codes must be provided where you have requested payment in Euro/GBP/CHF. In the case of incomplete information, we shall effect payment in our best endeavor. None of the Fund, the Manager, the Administrator or their agents or affiliates accepts any responsibility for any loss or delay caused by incomplete / incorrect bank account details.

如閣下要求以歐元 / 英鎊 / 瑞士法郎作為收款貨幣，必須提供銀行代碼 (SWIFT / BIC) 或國際銀行帳號 (IBAN)。在資料不完整之情況下，本公司亦將盡最大努力完成付款程序，但基金經理、管理商或其代理人、或其他有關機構將不會承擔任何因不完整 / 不正確銀行帳戶資料所造成之損失或延誤責任。

\*\* The bank account name and number MUST correspond to an account in the name of the Registered Holder.

銀行賬戶名稱及賬戶號碼必須符合以註冊持有人名稱所登記之賬戶。

**Signatures and Date 簽署及日期**

• Single / Joint account holder(s) must sign this form in accordance with the initial subscription documentation.

個人 / 聯名賬戶持有人必須根據首次認購文件之要求簽署此表格。

• Corporate investors must sign under seal or power of attorney.

機構投資者必須以公司印章或經由授權人仕簽署。

1) \_\_\_\_\_  
Signature 簽署 Name of Signer 簽署者名稱

2) \_\_\_\_\_  
Signature 簽署 Name of Signer 簽署者名稱

3) \_\_\_\_\_  
Signature 簽署 Name of Signer 簽署者名稱

4) \_\_\_\_\_  
Signature 簽署 Name of Signer 簽署者名稱

Date 日期: \_\_\_\_\_

## Document Checklist for Change of Particulars 更改資料所需文件之規定

Please submit an original signed Change of Particulars Form with the required document(s) as listed below.  
申請人必須提交已簽署之資料更改表格正本及下列類別所需文件。

Type of Changes 更改類別	Individual Investor 個人投資者	Institutional Investors 機構投資者
Registered Name 戶口登記名稱	<ul style="list-style-type: none"> <li>Original certified true copy of official photo ID card / passport 已確證之身份證 / 護照副本(須附有相片)</li> <li>Original certified true copy of marriage certificate (if applicable) 已確證之結婚證明書副本(如適用)</li> </ul>	<ul style="list-style-type: none"> <li>Original certified true copy of the change of name certification. 已確證之名稱更改證書副本</li> </ul>
Correspondence / Registered Address 戶口登記 / 通訊地址	<p><i>At least one:</i> 以下其中一項</p> <ul style="list-style-type: none"> <li>Copy of official photo ID card / passport 身份證 / 護照副本(須附有相片)</li> <li>Copy of address proof of the new address issued within recent three months (e.g. utility bill) 最近三個月內地址證明副本(如公用服務結單)</li> </ul>	<ul style="list-style-type: none"> <li>Office relocation notice 公司遷址通知</li> </ul>
Standing Payment Instruction 常行付款指示	<p><i>At least one:</i> 以下其中一項</p> <ul style="list-style-type: none"> <li>Copy of official photo ID card / passport 身份證 / 護照副本(須附有相片)</li> <li>Copy of bank statement of the designated bank account 銀行賬戶結單副本</li> </ul>	<p><i>Not Applicable</i> 不適用</p>
Phone Number 電話號碼	<p><i>At least one:</i> 以下其中一項</p> <ul style="list-style-type: none"> <li>Copy of official photo ID card / passport 身份證 / 護照副本(須附有相片)</li> <li>Copy of telephone bill of the new number 已更新電話號碼結單副本</li> </ul>	<p><i>Not Applicable</i> 不適用</p>

**Note 備註** Certified true copy is accepted from independent suitable certifier such as lawyer, accountant, notary public, member of the judiciary, or director or manager of a regulated credit or financial institution in a jurisdiction that is a Financial Action Task Force (FATF) member. The certifier should sign and date the copy document (printing his/her name clearly in capitals underneath) and clearly indicate his/her position or capacity, together with a contact address and phone number. The certifier must indicate (or words to similar effect) that the document is a true copy of the original and that the photo is a true likeness of the individual. Where documents are not in English, a notarised translation is required.  
所有需要確證之文件副本必須經由打擊清洗黑錢財務行動特別組織成員 (FATF) 或相應國家之執業會計師 / 律師 / 公證人 / 司法人員 / 信貸監管或金融機構之經理或主管獨立核證。簽證人必須於文件副本上簽署及註明日期 (於簽署位置下方以正楷全名清楚註明)，並清楚列出其職銜或資格及聯絡資料。簽證人必須具體聲明 (或以同義句子陳述) 該文件副本已確證為相關正式文件之副本及其提供之相片為持有人本人。若該文件並非以英文書寫，其譯本必須提交並經由簽證人核實。