

# 代理行使權申請表格

## Corporate Representative / Proxy Request Form

To : ABCI Securities Company Limited  
農銀國際證券有限公司

客戶號碼 Client Code : \_\_\_\_\_

客戶名稱 Client Name : \_\_\_\_\_

### 會議資料 Meeting Details:

股票號碼 Stock Code: \_\_\_\_\_ 股票名稱 Stock Name: \_\_\_\_\_

請選擇適當項目 Please tick the appropriate box

### 會議類別 Meeting Type:

- AGM (Corp Rep / Proxy)  SGM (Corp Rep / Proxy)  
 EGM (Corp Rep / Proxy)  Court Meeting (Corp Rep / Proxy)

會議日期 Date of Meeting: \_\_\_\_\_

持行使權 Holding of Corp Rep / Proxy: \_\_\_\_\_

### 代理行使權 (請於合適方格內✓) Corp Rep / Proxy Details (Please ✓ the appropriate box):

- FOR 贊成** :
- ALL RESOLUTIONS 全部決議案
- PARTIAL RESOLUTIONS 部份決議案  
Resolutions no.決議案編號: \_\_\_\_\_
- AGAINST 反對** :
- ALL RESOLUTIONS 全部決議案
- PARTIAL RESOLUTIONS 部份決議案  
Resolutions no.決議案編號: \_\_\_\_\_

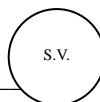
親身投票 – 如授權第三者，請提供被授權者資料  
 Vote In person – if authorize third party, please provide the authorized person detail.  
名稱(姓氏行先): 先生/小姐  
Full Name (Surname First): Mr/Ms \_\_\_\_\_  
地址  
Correspondence Address: \_\_\_\_\_

備註 : 申請表格務表於上述會議日期前二個工作日交付至結算部。

Remarks : Request Form should be reached our Settlement Department 2 Business Day before Meeting Date as stated above.

客戶簽署

Client's Authorised Signature(s): \_\_\_\_\_



日期

Date: \_\_\_\_\_

### For Internal Use Only

#### CCASS

\_\_\_\_\_  
Input By                      Checked By                      Approved By                      Released By