止付通知書

STOP PAYMENT INSTRUCTION

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致: To:		「銀行」,包括其繼承人和受讓人) ted (the "Bank", which includes its successors a	日期 and assigns) Date
		分行 Branch	
關於 Re:	戶口號碼 Account No. :		
	戶口名稱 Account Name :		
支票資料	CHEQUE(S) INFORMATION		
支票號碼	Cheque Number(s)	支票日期 Date of Cheque(s)	金額 Amount
受款人	Payee		
止付理由	Reason for Stop Payment		
字 字 就: I//	明 Declaration 銀行登記本人/我們委託之支票山/e acknowledge and accept that the applicable and following ter 如由上述申報之止付理由不再 I/We will immediately notify the to apply. 若此止付通知書未能及時送交 This stop payment instruction or paid into another account in time for the Bank to stop su 銀行毋須承擔因執行此止付通任何直接或間接的费用、開支 While acting on my/our stop proosts and expense due to or a	payment of the above mentioned cheque(set/fill)	下列各項條款及規章: Id seek to stop payment of the above cheque(s) subject Int order if the reason for this stop payment order ceases 此止付通知書即為無效。 Id cheque(s) was/were already encashed or transferred If other bank or if the stop payment order is not received 本人/我們將承擔賠償銀行因執行此止付通知書而招致之 Esponsible for any liabilities, loss, damage actions, suits, shall indemnify you on demand against all and any such
	取銷上述支票之止付通知。 u are hereby requested to cand	el the stop payment instruction of the abov	ve mentioned cheque(s).
Please d	•	dling charges and all other charges/fees in	ncurred.
	的指示已清楚,準確及完整地填妥放 onfirm that your instructions hav	於本表格內才簽署作實。 e been clearly, accurately and completely set	t out in this form before signing it.

簽署(須與銀行記錄相符) Signature(s) filed with the Bank	

銀行専用 For Bank Use Only						
Date & Time of Receipt:			Remark			
Attended By (Signature, Name & Date)	(Mark name & date if different from the attending staff.)		Approved By (Signature with No., Name & Date)			
Operator:		Supervisor:				