

DIRECT DEBIT AUTHORISATION (Generic Set-up) 直接付款授權書

Use only: 1. Please tick where applicable, 如有適用者請在上方填標。
 2. For HSBC customers, please return the completed form to the Bank or mail to Automatic Payments Centre, Payment Services at P.O. Box 72677, Kowloon Central Post Office, New Kowloon, Hong Kong. You may also set up the direct debit authorisation through HSBC Internet Banking. For non-HSBC customers, please complete the return of this form to your bank's direct debit enquiry centre. 對於非滙豐客戶，請將已填妥的表格寄回本行或寄往大銀行的直接付款查詢中心。如欲查詢詳情，請向本行或大銀行的直接付款查詢中心查詢。
 3. Your Direct Debit Authorisation set-up request will normally be processed within 4 working days, excluding Saturday, Sunday and public holiday, upon receipt of your form. 一旦收到表格，本行將在四個工作天內處理您的直接付款授權書。
 4. Please refer to the back cover guide for details of the charges. 收費之詳情請參閱背面說明書。

Date 日期: DD MM YYYY **1**

Name of Party to be Credited (The Beneficiary) 收款人姓名(收款人): **CIVIC JOURNALISTS LIMITED**
 Bank No. 總行號碼: **0104** Branch No. 分行號碼: **747** Account No. 戶口號碼: **0276888838**
 My/Our Bank Name and Branch 本人(等)的銀行及分行的名稱: **3** Branch No. 本人(等)的分行號碼: **4** My/Our Account No. 本人(等)的戶口號碼: **5**

My/Our Name(s) as recorded on Statement/Passbook (in Block Letters) 本人(等)在結單/存摺上所記錄的姓名(請以英文正確填寫): **6**

Contact Telephone No. 聯絡電話號碼: **7**

Maximum Limit for 最高付款限額: **8**
 Note: 注意: If blank, this authorization shall have effect and further notice will be given to the creditor. 如無填寫，此項授權書將繼續生效，本行將在另行通知債權人後再另行通知。
 Each Payment 每次: Each Month 每月:
 Expiry Date (day/month/year) 有效期間(日/月/年): **9**
 Note: 注意: If blank, this authorization shall have effect and further notice will be given to the creditor. 如無填寫，此項授權書將繼續生效，本行將在另行通知債權人後再另行通知。

My/Our Address as recorded on Statement/Passbook 本人(等)在結單/存摺上所記錄的地址: **10**

Debtor Name (in Block Letters) 付款人名稱(請以英文正確填寫): **11**
 Note: 注意: Please specify if other than Account Holder. 如非戶口持有人，請填寫。
 Debtor Reference (Compulsory Field) 付款人編號(必填之欄): **Monthly Subscriber**
 (Reference between yourself and the party to be credited 貴銀行與收款一方之編號)

Declaration (For HSBC Customer Only) 聲明(只適用於滙豐客戶):

- I/we hereby authorize my/our above named Bank to effect transfers from my/our account to that of the above named beneficiary in accordance with such instructions as my/our Bank may receive from the beneficiary, under its banker's consent, from time to time provided always that the amount of any such transfer shall not exceed the limit indicated above. 本人(等)無條件授權本人(等)的「總行及分行」(或滙豐的客戶)向指定收款人(等)的戶口作定期或不定期的轉帳。轉帳數目不得超過上方所填的限額。
- We agree that my/our Bank shall not be obliged to ascertain whether or not notice of any such transfer or reversal notice has been given to us, unless we advise the Bank to do so. 本人(等)同意本行無須負責查明任何有關轉帳或逆轉通知是否已交予本人(等)。
- I/we jointly and severally accept full responsibility for any amount (or amounts in severalty) on my/our account which may arise as a result of any such transfer(s). 本人(等)共同及個別地承認對本人(等)的戶口內任何款項(或分別款項)負全責。
- I/we understand that we must maintain sufficient funds in the account into which the credit of funds is made (before the expiry date of the authorization) in order to meet any transfer authorized hereon. my/our Bank will be entitled to debit our account if we fail to do so. 本人(等)明白，我們必須在授權書生效前，在戶口內維持足夠款項以應付上述授權書所指示的轉帳。本人(等)明白，如果我們未能遵守上述授權書的指示，本行有權從我們的戶口內扣除款項。本人(等)明白，本行有權從我們的戶口內扣除款項，且本人(等)明白，本行有權從我們的戶口內扣除款項，並可隨時取消該等授權書而無須通知本人(等)。
- This direct debit authorization shall have effect until the expiry date then shown (whichever shall first occur). I/we agree that this authorization is performed on my/our account under such authorization for a continuous period of 30 months, my/our Bank reserves the right to cancel the direct debit arrangement without prior notice to us, even though the authorization has not expired or there is no expiry date for the authorization. 本直接付款授權書將繼續生效直至上方所填的日期為止。本人(等)明白，本行有權在授權書生效後三十個月內隨時取消本授權書，而無須通知本人(等)。
- We agree that any notice of cancellation or variation of this authorization which we may give to my/our Bank will be given at least two working days prior to the date on which such cancellation/variation is to take effect. 本人(等)明白，本人(等)如欲取消或更改此項授權書，須於取消或更改生效前最少兩個工作天通知本人(等)的銀行。
- The Bank may change or suspend the authorization from my/our account at any time without notice to us, if the case requested by the Bank from time to time. 本人(等)的銀行可隨時取消或更改本人(等)的戶口內之直接付款授權書，而本人(等)明白，本行有權隨時取消或更改本人(等)的戶口內之直接付款授權書。

My/Our Bank Account Signature(s) 本人(等)銀行戶口直簽名: **12**

For Bank Use Only 銀行專用: Remarks 備註: Branch Chop 分行印章: Staff ID 員工編號:

參考

- 填寫此表的日期，格式：DDMMYYYY
- 你的銀行戶口所屬銀行
- 銀行編號，可在存摺或結單找到的3位編號，或可向所屬銀行查詢，如滙豐是004、中銀是012、富邦是128、花旗是250
- 分行編號，存摺或結單上緊接銀行編號的3位編號
- 銀行戶口號碼，存摺或結單上最後6至9位編號
- 銀行戶口所登記的姓名，請用英文填寫
- 你的電話號碼
- 每月月費，如填\$100、\$200、\$500
- 如想一直訂閱，無須填寫；如設定終止訂閱月份，請填終結月後加30日，格式：DDMMYYYY，或你亦可隨時通知我們終止服務
- 銀行戶口上登記的地址
- 如訂戶的名稱與銀行戶主名稱不同，請填寫你的名稱；相同則無須填寫
- 銀行簽署，並以其中一種方法交回：
 - 交給我們代理
 - 郵寄至「長沙灣永康街77號環薈中心12樓10室」
 - 我們收到表格後將致電向你核實
 - 投遞至你戶口所屬的銀行
 - 請緊記將表格中的第2至9部及第11部資料，電郵至 subscribe@hkcnnews.com，以便安排服務
 - 到戶口所屬的分行，將表格放入投遞箱/交給職員(請向分行職員查詢)