The Hongkong and Shanghai Banking Corporation Limited
Incorporated in the Hong Kong with limited liability

Branch ____________ Date: D D M M Y Y Y Y

TMD Encashment Form

The Manager

Dear Sir/ Madam

Please encash my time Deposit (TMD) A/C No. ___–______–___ and credit the proceeds to the A/C No. ___–______–___ maintained in the name of ____________

Furthermore, I/we confirm that I/we have understood, agreed to and accept any applicable deduction on the total amount received by me/us under this encashment request.

Signature of the account holder(s)

S.V

Name:

Account No. ___–______–___

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