

## **SECURITIES INSTRUCTION FORM**

DATE:	(/	Please print,	fill out & subm	it the ORI	GINALLY .	signed fo	rm to COL Fi	nancial's Operations Dept)	
Stock Transfer In (Receive shares from other Brokers)					☐ <b>Lodgment</b> (Deposit Certificates)				
Stock Transfer Out (Deliver shares to other Brokers)					☐ <b>Upliftment</b> (Withdraw Certificates)				
☐ Internal Transfer (No ch	ange in	beneficial o	owner) From (	COL Acct	::		to		
(For STOCK TRANSFERS IN/	OUT) (Ki	ndly furnish	both COL Finan	icial and	the count	erparty b	roker a copy	of this form)	
Counterparty Broker Name		Counterparty Broker Conta			ct Details Accou		nt Name w/Counterparty Broker		
Name of Security	Sto	ck Code	# Shares		Ave Cost*		# Certificates (only for Lodgment)		
1.								, , , ,	
2.									
3.									
4.									
5.									
6.									
7.									
*For Lodgment and Stock Transfer In only. If left blank, the default value will be the previous closing price of the Lodgment/Stock Transfer In day.									
Standard Fees per Stock								Processing Period	
Stock Transfer In/Out: Php75/transfer								2 working days	
Lodgment Fee: [Php100 per stock (per 20 Pcs of Certificates) + Cancellation					Php20/ cer	tificate] +	2 to 3 weeks		
<b>Upliftment Fee:</b> Php150 (or Php162 for non-bank transfer agents)						At least 30 days			
Mail/Courier Fee**: Php200 for local deliveries / International de				ivery charges would vary				1 week / ++	
Terms & Conditions: I agree that ask for more requirements which automatically deem the request from COL's main office within 3 related fees, including courier feets personnel liable for any and a	ch may in as cance working es, which	crease the pelled. (3) For days of notice are nonrefu	rocessing time. upliftment reque, c, COL shall cou undable and sha	I shall su uests and Irier them Ill be ded	bmit then cancelled to my de	n within 2 lodgmer livery add n my COL	weeks from it, if I am una dress. In such account. I ag	notice, otherwise COL shall able to claim the certificates case, I agree to shoulder all gree not to hold COL/ any of	
PRIMARY ACCOUNT HOLDER'S SIGNATURE OVER PRINTED NAME COL ACCOUNT #				SECONDARY ACCOUNT HOLDER'S SIGNATURE OVER PRINTED NAME DELIVERY ADDRESS: (No. & Street/Building/Subdivision)  (Town/District/City/Brovince)					
CONTACT #				(Town/District/City/Province)					
EMAIL ADDRESS:				(Postal Code/Country)					