

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

Client Name: \_\_\_\_\_

Trading Account No: \_\_\_\_\_

CDS Account No: \_\_\_\_\_

To : AmInvestment Bank Berhad  
(Attn: Account Management Unit)  
8<sup>th</sup> Floor, Bangunan AmBank Group  
55, Jalan Raja Chulan  
50200 Kuala Lumpur

**Re : AUTHORISATION AND CONSENT FOR AMINVESTMENT BANK (AMIB) TO ENQUIRE AND  
CAPTURE CLIENT'S CDS SECURITIES BALANCES AS PORTFOLIO**

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I/We hereby grant AMIB my/our consent and authorise its authorised officers or agents to access and enquire my/our securities balances in my/our trading account or CDS account with AMIB for the purpose of capturing, maintaining and displaying them as my/our portfolio in AMIB's back office system and AmeSecurities electronic trading system and/or any other electronic trading system which may be introduced by AMIB from time to time. I/We further agree and authorise and consent to AMIB to disclose my/our portfolio to my/our dealer's representative to facilitate the sale or purchase of my/our securities.

I/We declare that I/we understand that my/our portfolio is created and maintained on best effort basis based on sources which AMIB believed to be reliable. It has been highlighted to me/us that the portfolio may not be as accurate as per my/our CDS account balance enquiry/statement and therefore I/we agree not to hold AMIB liable for any losses of whatsoever nature that resulted from my/our reliance on the portfolio. I/We hereby undertake to inform AMIB immediately should there be any discrepancies in my/our portfolio.

I/We confirm and declare that I/we have read and understood the above authorisation and consent granted and hereby release AMIB from all liabilities of whatsoever nature arising from this authorisation.

Signed by:

Verified by:

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Client or Authorised Signatory(ies)

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Account Management Unit

(Affix company's rubber stamp, if applicable)