

Statement / Chit Copy Request Form

Re: Discovery Bay Unit: _____ (_____)

Membership No.: _____ - _____

Name of Principal Cardholder:

Title: _____ Surname: _____ Given Name: _____

Contact No: _____ E-mail: _____

Correspondence Address: _____

Details of Request:

Please arrange to provide me / us with a copy of the following document(s): (Tick as appropriate)

Statement (\$10 per copy) Period from _____ (mm) - _____ (yyyy) to _____ (mm) - _____ (yyyy)

Chit Requisition (\$10 per copy)

Transaction Date	Chit Number	Amount (HK\$)
_____ (dd) - _____ (mm) - _____ (yyyy)		
_____ (dd) - _____ (mm) - _____ (yyyy)		
_____ (dd) - _____ (mm) - _____ (yyyy)		

Preferred Method of Receiving Document: (Tick as appropriate)

By Post _____ (if different from the above)

By E-mail _____ (if different from the above)

By Fax _____ (if different from the above)

Payment of Administration Fees:

Administration fees will be charged according to the above request(s) for duplicated copy of statement that consists of transactions over one month. The total amount will be debited to your membership account directly.

Types of administration fees:

- \$10 per copy of monthly statement of account.
- \$10 per copy of a signed chit

*Signature of Principal Cardholder

Date

FOR OFFICE USE ONLY A/C No.:	Processed on:	By:
Types of Request Form: Statement / Chits	Total Copy of Statement(s):	
Total Copy of Chit(s):	Receipt No.:	

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