

## **APPLICATION FOR SHARE SUBSCRIPTION**

## To: SSI SECURITIES CORPORATION

Shar	eholder's Information:
- - - -	Name of Shareholder:  Passport/BRC No.:  Address:  Legal Representative (for institution):  ID Card/Passport No.:  Telephone:  Email:
Cont	ents of Share Subscription:
	Name of Share: Share of SSI Securities Corporation Ticker: SSI The quantity of owned SSI shares as of September 09, 2021:
I/We	declare that:
-	Carefully understand shareholders' rights and obligations in relation to shares purchase and commit to follow strictly these rights and obligations in compliance with the applicable laws and Company Charter.
-	Responsible for the legality of capital resource for purchasing shares.  Disclosed information completely to comply with the applicable laws (in case of compulsory information disclosure) and deposit fully taxes, fees stipulated in the provisions (if any).  Responsible completely for all arising claims, disputes (if any) related to this share subscription.

## Confirmation of SSI Securities Corporation Representative

Dated ...... 2021

(Sign, Seal, Full name & Position)

## \*Attachments:

- Photocopy of ID Card/Passport (For Individual) or BRC (For Institution);
- Deposit Slip or documents proving for bank transfer;
- Request on subscription rights transfer (In case individual/institutional subscriber is transferee from the subscription transfer).