



GLOBAL SHARE PLAN
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SCHEDULE 2 CHANGE OF DEDUCTIONS

Employer

☐ EC Harris Hong Kong Ltd
Level 27, Millennium City 6
392 Kwun Tong Road
Kwun Tong, Kowloon
Hong Kong

Employer

☐ Langdon & Seah Hong Kong Limited
38/F, AIA Kowloon Tower
Landmark East, 100 How Ming Street
Kwun Tong, Kowloon
Hong Kong

Date

Re: "Global Share Plan" ("Plan") – Change my Deductions

Dear Sir/Madam,

I refer to my Participation Agreement dated

and more in particular to articles 3.1 of that Participation Agreement and Article 5.5 of the Plan concerning the adjustment of the amount of my Deductions. Capitalized terms used but not defined herein shall have the meaning assigned to them in the Participation Agreement and the Plan.

I would like to change, and will change, the amount of my Deductions effective as per

☐ 1 July ☐ 1 January to an amount of HKD per month.
(minimum HKD 250 and maximum HKD 4,000)

I understand that the change of the amount of my Deductions will only become effective on 1 July or on 1 January in case my Employer has received the changed amount of my Deductions on its bank account, as indicated on the 'Participant Detail Sheet', and has received this written notice before 1 July or 1 January of the calendar year in which the change of the amount of my Deductions should become effective. If the changed amount of my Deductions has not been received by my Employer on its bank account and this written notice is not received before 1 July, the change shall become effective as per 1 January of the following calendar year. If the changed amount of my Deductions has not been received by my Employer on its bank account and this written notice is not received before 1 January, the change shall become effective as per 1 July of the following calendar year.

I understand and acknowledge that the adjustment of my Deductions in accordance with the terms of this Schedule 2 will not change the remaining terms and conditions of my participation in the Plan as set forth in the aforementioned Participation Agreement.

Yours sincerely,

Name of Participant

Signature

Address of Participant

Personnel ID Number ("SAP")

Bank account number



THE COMPLETED AND SIGNED FORM CAN BE SENT TO
YOUR **HR DEPARTMENT** OR YOUR **RP ADMIN**.