

AB

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Co. No.

_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|
MM / YY

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CAT.

(For Official Use Only)

SECRET
under the Banking Ordinance

**QUARTERLY REPORTING ON THE
COUNTERCYCLICAL CAPITAL BUFFER (CCyB)**

***COMBINED / CONSOLIDATED RETURN**

As at _____

* Delete which is not appropriate. Combined and consolidated returns are defined in the completion instructions.

Name of Authorized Institution	Date of Submission
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The Banking Ordinance

Information requested in this return is required under section 63(2) of the Banking Ordinance. The return should be submitted to the Monetary Authority not later than 1 month after the end of each quarter, unless otherwise advised by the Monetary Authority.

Note: This return is to be prepared in accordance with the completion instructions issued by the Monetary Authority

We certify that this return is, to the best of our knowledge and belief, correct.

Chief Accountant

Chief Executive

Name

Name

Name and telephone number of responsible person who may be contacted by the Monetary Authority in case of any query

Name

Telephone Number

