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HAITONG MPF RETIREMENT FUND 海通 MPF 退休金

LUMP SUM TAX DEDUCTIBLE VOLUNTARY CONTRIBUTIONS ACCOUNT FORM

一次性可扣稅自願性供款帳戶表格

Note 注意：

- ◆ You are required to provide the personal information indicated with symbol [⊗]. Otherwise, we may not be able to process your instruction. 閣下必須提供以符號[⊗]表示的個人資料。否則，我們將可能無法處理您的指示。
- ◆ Please fill in this Form carefully. Any amendments should be clearly marked and counter-signed. Please do not use correction fluid. 請小心填寫此表格。如有任何資料刪改，請必須加簽。請避免用塗改液刪改資料。
- ◆ Please send the completed Form to **Member Services, Fund Services Hong Kong, HSBC Institutional Trust Services (Asia) Limited, P.O. Box 73448, Kowloon Central Post Office, Hong Kong.** 請將填妥表格寄往**香港九龍中央郵政局郵政信箱 73448 號，滙豐機構信託服務（亞洲）有限公司，退休金行政部收。**
- ◆ Should you have any questions when completing this Form, please feel free to call Haitong MPF 24 Hours Auto-Info-line at 2500-1600. 如閣下於填表時有任何疑問，請致電海通 MPF 24 小時自助資訊通 2500-1600。
- ◆ All investments are subject to the latest Explanatory Memorandum (and any Addenda thereto) of the Haitong MPF Retirement Fund (the “Plan”), as amended from time to time. Please refer to the latest Explanatory Memorandum (and any Addenda thereto) of the Plan for details. Effective 1 April 2020, the Explanatory Memorandum will be renamed to MPF Scheme Brochure. 所有投資資料經不時修改須以海通 MPF 退休金（“本計劃”）之最新基金說明書（及其附錄）為準。詳情請參考本計劃之最新基金說明書（及其附錄）。由 2020 年 4 月 1 日起，「基金說明書」將改名為「強積金計劃說明書」。

PART I - PERSONAL INFORMATION 第一節—個人資料

Please ✓ the appropriate box 請在適當空格填上✓號

[⊗] Member English Name 成員英文姓名 <input type="checkbox"/> Mr 先生 <input type="checkbox"/> Ms 小姐 <input type="checkbox"/> Mrs 女仕 Surname 姓 _____ First Name 名 _____		
Member Chinese Name 成員中文姓名		[⊗] <input type="checkbox"/> Hong Kong ID Card No. 香港身份證號碼 / <input type="checkbox"/> Passport No. 護照號碼
[⊗] Contact Tel. No. 聯絡電話號碼	Mobile No. 手提電話號碼	Tax Deductible Voluntary Contributions Account No. 可扣稅自願性供款帳戶號碼
[⊗] Job Details 工作資料 (Please ✓ the appropriate box. 請在適當的空格填上✓號) Occupation Details 職業資料 <ul style="list-style-type: none"> <input type="checkbox"/> Employee 受僱 (Job Position 工作職位: _____) <input type="checkbox"/> Not currently employed 現時並未受僱 <input type="checkbox"/> Full-Time Student 全日制學生 <input type="checkbox"/> Housewife 家庭主婦 <input type="checkbox"/> Others 其他 (please specify 請註明: _____) In position of control of the corporation 為該公司/機構的管理層 <input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否 Nature of Business 業務性質 <ul style="list-style-type: none"> <input type="checkbox"/> Catering 飲食及酒店業 <input type="checkbox"/> Manufacturing 製業製造業 <input type="checkbox"/> Construction 建造業 <input type="checkbox"/> Cleaning 清潔業 <input type="checkbox"/> Transport 運輸業 <input type="checkbox"/> Security Guard 保安護衛業 <input type="checkbox"/> Finance / Insurance / Real Estate / Business Services 金融 / 保險 / 地產 / 商用服務業 <input type="checkbox"/> Community / Social / Personal Services 社區 / 社會 / 個人服務業 <input type="checkbox"/> Wholesale / Retail / Import and Export Trades 批發 / 零售 / 進出口貿易業 <input type="checkbox"/> Hairdressing and Beauty 理髮及美容業 <input type="checkbox"/> Others 其他 (please specify 請註明: _____) 		
[⊗] Source of Fund/Wealth (may choose more than one) 資金/財富來源 (可選擇一個或以上) (Please ✓ the appropriate box. 請在適當的空格填上✓號) <ul style="list-style-type: none"> <input type="checkbox"/> Earning from work 工作薪金 <input type="checkbox"/> Inheritance 遺產繼承 <input type="checkbox"/> Sale of assets (e.g. property) 出售資產 (例如物業) <input type="checkbox"/> Personal savings 個人儲蓄 <input type="checkbox"/> Investment return/Investment matured 投資回報/投資到期 <input type="checkbox"/> Others 其他 (Please specify 請註明: _____) 		

⊗ **Salary Range (HKD per month) 入息概況 (每月港幣)** (Please ✓ the appropriate box. 請在適當的空格填上 ✓ 號)

- N/A Below 10,000 10,000 - 19,999 20,000 - 39,999
 40,000 - 69,999 70,000 - 99,999 100,000 - 200,000 Above 200,000 以上 (Please specify 請註明: _____)

⊗ **Country(ies) where the income and wealth obtained (please list out all countries) 收入與財富來源(請列明所有國家):**

PART II - LUMP SUM TAX DEDUCTIBLE VOLUNTARY CONTRIBUTIONS DETAILS 第二節—一次性可扣稅自願性供款資料

Note 注意：

- ◆ Please note that your cheque must be drawn by the account owner as shown on Part I and issued by a Hong Kong licensed bank. Otherwise, such payment will not be accepted. We do not accept cheque drawn by third parties on behalf of the applicant.
請注意您的支票必須以第一部份戶口持有人名義經由香港持牌銀行發出。否則，此款項將不被接納。我們將不接受第三者代付的支票。
- ◆ The Lump Sum Tax Deductible Voluntary Contributions is contribution in addition to your Regular Tax Deductible Voluntary Contributions.
此一次性可扣稅自願性供款是你的定期可扣稅自願性供款以外的額外供款。

Payment Amount 付款金額

I would like to contribute HKD _____ to my Tax Deductible Voluntary Contributions Account as a Lump Sum Tax Deductible Voluntary Contributions. (Please note that the minimum contribution amount is HKD1,000)

本人希望供款港幣_____至本人之可扣稅自願性供款戶口內作為一次性可扣稅自願性供款。(請注意最低供款額為港幣壹仟元正)

Payment Method 付款方法

Please enclose a crossed cheque made payable to "HSBC Institutional Trust Services (Asia) Limited – Haitong MPF Retirement Fund".
請連同劃線支票抬頭支付予"HSBC Institutional Trust Services (Asia) Limited – Haitong MPF Retirement Fund"。

PART III – PERSONAL DATA COLLECTIONS STATEMENT 第三節—個人資料收集聲明

I agree that

本人同意：

1. Subject to any applicable laws of Hong Kong Special Administrative Region, information supplied on the Schedule(s) or the Form and otherwise in connection with my participation in the Plan may be used for one or more of the following purposes: (i) processing my participation in the Plan, including but not limited to administering and managing my contributions and accrued benefits under the Plan, e.g. carrying out my instructions or responding to any enquiry purporting to be given by me or on my behalf, and dealing in any other matters relating to my participation in the Plan (including the mailing of reports or notices), (ii) complying with an order of any court and observing any legal, governmental or regulatory requirements of any relevant jurisdiction (including any disclosure, reporting or notification requirements to which any recipient of the data is subject, e.g. tax reporting requirements under the Inland Revenue Ordinance and its provisions) and, (iii) to provide a marketing database for MPF product and market research if it is / they are relevant to the Plan or to provide information for the dispatch of information on other products or services to me from the Plan's Sponsor "Haitong International Investment Managers Limited" ("Sponsor") or any connected person of the Sponsor if such products or services relate to the Plan. To the extent not prohibited by the MPF legislations and/or the Personal Data (Privacy) Ordinance ("PDPO"), all of such information may be retained after I have ceased to participate in the Plan.

根據香港特別行政區的適用法律，本人參與計劃相關表格或其他文件上所提供的資料，會將用作以下目的：(i) 處理本人參與強積金計劃的相關事宜包括但不限於處理參與計劃中的累算權益，執行本人的指示、回應本人的查詢或回應宣稱代本人作出的查詢、處理本人參與強積金計劃相關的其他事宜(包括寄發報告或通知書)，(ii) 遵守任何法律的命令及司法權區的法律、政府、監管規定(包括收集這些數據而須作出披露、報告或通知的規定，如稅務局及相關規定下的稅務報告)，(iii) 為強積金產品或市場研究作為營銷的數據庫(如與強積金計劃有關)、保薦人海通國際投資經理有限公司(“保薦人”)或其關連人士須向本人寄發其他產品或服務資料而需要的資料(如與強積金計劃有關)。在個人資料(私隱)條例及/或強積金法例不禁止的前提下，即使本人不再參與強積金計劃，所有這些資料仍會被保留。

2. Upon request, I am entitled under the PDPO to be informed by the Sponsor whether it holds personal data as defined under PDPO about me and to request access to and/or correction of any such data. I also have the right to inform the Sponsor at any time if I do not wish to receive any marketing materials in relation to the Plan. Any such request may be made by post to the Client Services Officer, Haitong International Investment Managers Limited, 22/F, Li Po Chun Chambers, 189 Des Voeux Road Central, Hong Kong.

本人可要求並有權根據個人資料(私隱)條例而了解保薦人是否持有個人資料(私隱)條例所界定有關本人的個人資料，並可要求查閱及/或更改任何這些資料。本人有權隨時通知保薦人本人不希望再收取與強積金計劃相關的推廣資訊的意願。有關要求可以書面方式寄發到向海通國際投資經理有限公司的客戶服務部(地址為香港德輔道中189號李寶椿大廈22樓)。

3. For the purposes stated above, the Trustee may, directly or indirectly, disclose and transfer such information to the auditors of the Plan and the Sponsor, including any of their employees, officers, directors and agents, and / or to the ultimate holding company of the Sponsor and the Trustee, and / or their subsidiaries and/or affiliates or to any third party service provider, agent or delegate employed to provide services or hardware such as administrative, computer, operational support or other services or facilities which are relevant to or in connection with operation of the Plan. The Trustee may also

make disclosure or transfer data, directly or indirectly, to any judicial, governmental or regulatory authority entitled thereto by law or regulation (whether such authorities are statutory or not). Provision of data made by the Trustee pursuant to this clause may be to any persons outside Hong Kong.

根據上述目的，受託人可能需要直接或間接向某些人士披露和轉交這些資料，這些人士包括強積金計劃和保薦人（包括其僱員、高級人員、董事及代理）的核數師及／或保薦人及託管人的最終控股公司及／或其附屬公司及／或聯屬公司，或受委聘負責向接收或獲轉交數據的人士提供行政、電腦、服務、操作協助或與運營計劃相關的設施的第三方。受託人亦可能需要就本人我們參與的強積金計劃直接或間接向有權按照法律法規的司法、政府或監管機構（不論是否法定機構）披露或轉交數據。受託人根據本條款所提供的數據或會向位於香港境外的人士提供。

4. I am required to provide the information supplied on the Form or otherwise in connection with my participation in the Plan, I understand that if I do not provide such information, the Trustee will not be able to properly process my membership and benefits under the Plan. I have the right to obtain access and to request correction of any personal information concerning myself held by the Trustee. Request for such access can be made in writing and addressed to Member Services, Fund Services Hong Kong, HSBC Institutional Trust Services (Asia) Limited, P.O. Box 73448, Kowloon Central Post Office, Hong Kong.

本人需要提供表格上提供的資料或與本人參與強積金計劃有關的資料，本人明白如本人不提供這些資料，受託人將不能適當處理本人的強積金計劃的會籍和福利。本人有權查閱受託人持有有關本人的個人資料及要求修改這些個人資料。本人可發出書面要求並寄發到滙豐機構信託服務(亞洲)有限公司, 退休金行政部(地址為香港九龍中央郵政局郵政信箱 73448 號)查閱個人資料。

PART IV - DECLARATIONS 第四節 – 聲明

I understand that my instruction given previously, as to whether I wish to / wish not to receive any marketing materials in relation to the Plan from the Sponsor, will continue to be in force unless I complete and submit a “Change of Particulars For Members / Self-Employed Person” form to change my consent.

本人明白本人之前提交的指示，就關於本人是否希望收取保薦人海通國際投資經理有限公司有關強積金計劃的推廣資料將會保持效力，除非本人完成並提交了更改成員/自僱人士資料表格。

I hereby agree to indemnify the Trustee against any actions, proceedings, claims, losses, damages, costs or expenses which may be brought against the Trustee or suffered or incurred by the Trustee arising either directly out of or in connection with the Trustee accepting facsimile instructions and acting thereon, whether or not the same are confirmed by me in writing, unless due to the wilful default or gross negligence of the Trustee.

本人同意並授權信託人接受傳真指示及根據該等指示處理有關事宜，而不須本人之確認。信託人無須因此而直接或間接負上任何責任，賠償，損失或費用。惟若因信託人故意失責或嚴重疏忽別論。

Notwithstanding the previous paragraph, the Trustee has the right to determine which Forms or other documents of instructions may or may not be accepted by facsimile.

儘管有上段之規定，信託人有權決定接受何種傳真表格或指示。

I understand and agree that the Sponsor, “Haitong International Investment Managers Limited” and/or the Trustee of the Plan may request from me, both upon this application and during such time as I am a member of the Plan, such evidence and/or documentation as any of them may require to fulfill their obligations under applicable law, regulation or regulatory policy, including, but not restricted to, laws, regulations or guidelines addressing money laundering, and I shall provide such information.

本人明白及同意保薦人海通國際投資經理有限公司及/或計劃的受託人可，在遞交本申請時及本人身為計劃成員期間，要求本人提交履行彼等的責任而可能需要的該等證明及/或文件。該責任根據適用法例、規例或規管政策，包括但不限於有關洗黑錢的法例、規例或指引，而本人亦必須提供該等資料。

I confirm that there is no change of my nationality, residential address and other relevant identification document as provided to the Trustee.

本人確認就本人的國籍、住址及已提供予受託人的其他該等身份證明文件均維持不變。

Signature of Member 成員簽署

(Must be identical to the Trustee’s record 必須與信託人的記錄相同)

Date 日期