



(For Internal Use Only 僅供內部使用)

INVESCO STRATEGIC MPF SCHEME 景順強積金策略計劃

VOLUNTARY CONTRIBUTIONS WITHDRAWAL FORM (FOR SELF-EMPLOYED PERSON OR PERSONAL ACCOUNT HOLDER)

自願性供款提取表格 (適用於自僱人士或個人帳戶持有人)

Please note 請注意:

- ◆ Read the MPF Scheme Brochure of Invesco Strategic MPF Scheme ("the Plan") carefully before completing this form. 填寫此表格前,請先細閱景順強積金策略計劃(「本計劃」)的強積金計劃說明書。
- ◆ Members should note that investment markets could fluctuate significantly. Fund prices may go down as well as up. There is no guarantee that, given the time required to implement voluntary contributions withdrawal instructions, such instructions will achieve your desired results. Please carefully consider your own risk tolerance level and financial circumstances (as well as your own retirement plan) before making any investment choices. If in doubt, please contact your independent financial advisor for further details. 成員必須注意投資市場可能出現顯著的波動,基金單位價格可跌可升。由於處理有關自願性供款提取指示需要一定的時間,因此未必能夠保證達到閣下預期的結果。在作出投資選擇前,閣下必須小心衡量個人可承受風險的程度及財政狀況(包括閣下的退休計劃)。如有任何疑問,請諮詢閣下的獨立財務顧問了解更多詳情。
- ◆ Use blue or black ball pen and complete this Form in BLOCK LETTERS. 請以藍色或黑色原子筆及正楷填寫此表格。
- ◆ "*" means delete whichever is inappropriate. Please insert ""N.A." if not applicable. 「*」請刪去不適用者。請在不適用處填上「不適用」。
- ◆ All amendments should be signed. 如有任何刪改,必須在旁加簽。
- ◆ The personal data to be supplied in this Form are to be used for the purpose(s) of processing your instruction(s) of withdrawal as requested in this Form. 在本表格提供的個人資料,將被用作處理閣下在本表格內要求的提取指示。
- ◆ Should you have any questions when completing this Form, please contact INVESCall Member Hotline on (852) 2842-7878. 如閣下於填寫表格時有任何疑問,請致電景順積金熟線 (852) 2842-7878 查詢。

Section 1 - Scheme Member Details 第 1 部份 - 計劃成員資料				
Name of Member 成員姓名 (Must be identical to HKID Card / Passport 必須與香港身份證/護照相同)				
□ Mr. 先生 □ Ms. 女士 □ Mrs. 太太 □ Prof. 教授 □ Dr. 醫生/博士 (please ✓ the appropriate box 請在適當方格內填上✓號)				
English 英文 Surname 姓 Chinese 中文				
Sufficiency:				
First Name 名				
Member Account Number 成員帳戶號碼 or 或 HKID Card / Passport* Number 香港身份證 / 護照*號碼				
Contact Phone Number 聯絡電話號碼				
Important Notes 重要提示				
If the account that to be withdrawn, which contains investment in <u>Default Investment Strategy ("DIS")</u> , and there is one or more of other				
transaction(s) is being processed, the annual de-risking of investment in DIS will be DEFERRED , it normally takes place on the next				
available dealing day after completion of such transaction(s); and vice versa. 若支付權益帳戶當中的投資含有預設投資策略(「預設投				
<u>資」)</u> 而帳戶內有一個或超過一個的其他交易正在執行中,該周年降低投資於預設投資風險指示將 順延 執行,一般在該等交易完成後下				
一個交易日執行; 反之亦然。				
• If you have reached, or are approaching, the age of 50 and your accrued benefits are currently invested according to the DIS of the scheme, you should be aware that the de-risking mechanism of the DIS starts at the age of 50. If the annual de-risking of your investments in the DIS and your claim for payment of accrued benefits take place at around the same time, the approved trustee of the scheme shall sequence the de-risking and the claim in accordance with its procedures and in compliance with the Mandatory Provident Fund Schemes Ordinance. Please consult the approved trustee of the scheme if you wish to know the details of how it will handle these transactions. 如 閣下已年滿或快將年滿 50 歲,而現時 閣下的累算權益是按照計劃的預設投資投資,請留意預設投資的降低投資風險機制,會由計劃成員年滿 50 歲開始運作。如計劃的核准信託人在預設投資下按年降低 閣下的投資風險的時間,與接獲 閣下的申索權益申請的時間相當接近,該計劃的核准信託人將根據其運作程序及在符合《強制性公積金計劃條例》規定的情況下,訂定處理降低風險及申索權益的次序。如欲瞭解計劃核准信託人如何處理該等交易,請向信託人查詢詳情。				
Section 2 – Withdrawal Details 第 2 部份 – 提取資料				
Members are entitled to make up to four withdrawals of their Voluntary Contributions in each calendar year free of charge. Each additional withdrawal in the same calendar year is subject to a fee of up to HK\$100 payable to the Approved Trustee. 成員於同一公曆年最多可免費提取自願性供款四次。若成員於同一公曆年額外提取權益,須向核准信託人支付每次最多 HK\$100 的費用。				
(i) Method of payment 付款方式: (Please ✓ the appropriate box 請在適當方格內填上 ✓ 號) □ By cheque 支票				
□ By depositing directly to the bank account under my name only (a bank account under the name of a third party is not applicable) 只直接存入以本人名義開立的銀行帳戶(不適用於以第三者名義開立的銀行帳戶) (There may be bank charges involved. 銀行可能會因此而收取費用。)				

Bank Account Number 銀行帳戶號碼

Name of Bank 銀行名稱

□ le	elect to withdraw <u>ALL</u> accrued benefits from Volus 人選擇提取上述第 l 部份所註明的帳戶中源於自lelect to withdraw the accrued benefits derived fro accordance with the governing rules of the Plan as 人選擇按計劃規則提取上述第 l 部份所註明的帳戶	性供款 所有 累算權益。 Voluntary Contributions in my accour ollows:	
Code 代號	Investment Ch 投資選擇	ices	Withdrawal Percentage % (Complete in multiples of 5%)^ 提取百分比% (請以 5%或其倍數填寫)^
DIS	Default Investment Strategy ⁺ 預設投資策略 ⁺		
HK	Hong Kong and China Equity Fund 中港股票基金		
HS	Invesco Hang Seng Index Tracking Fund [△] 景順恒指基金 [△]		
AE	Asian Equity Fund 亞洲股票基金		
GR	Growth Fund 增長基金		
BF	Balanced Fund 均衡基金		
CA	Core Accumulation Fund 核心累積基金		
RB	(No automatic de-risking features 沒有自動降低投資風險特性) RMB Bond Fund 人民幣債券基金		
CS	Capital Stable Fund 資本穩定基金		
	Age 65 Plus Fund 65 歲後基金		
65	(No automatic de-risking features 沒有自動降低投資風險特性)		
GB	Global Bond Fund 環球債券基金		
GTG	Guaranteed Fund 回報保證基金		
双高達每種 Section	ployed Person or Personal Account holder may withdraw up 重成份基金現有投資的 100%。 On 3 - Authorization and Declaration		MICHANICAL 日本人工头面人物产时行入时足
D. All in Form Form B. I have to pr may 洗黑	that 本人聲明 Information in this Form is accurate. 本表格所載derstand that the Approved Trustee may not be a n. 本人明白倘若本人未能提供本表格所需的 or read and agree to comply with the governing redertake to notify the Approved Trustee as soon as 內所載之資料有任何更改,將盡早通知核准付的理由,將盡早通知核准付的证明 that I will be required to provide evidence ovide my identity and source of funds. If Invescobe requested, and the relevant transaction shall 最終的有關法例及規則的要求而提供資料,以該「要求提供進一步資料,而有關交易謹在接獲	e to process this application if I fail to 資料,核准信託人將可能無法處理 es of the Plan. 本人已瞭解並同意達 possible of any changes to the informa 託人。 equired by applicable laws and regula he Approved Trustee does not received be processed until such documenta 明本人的身份及資金的來源。倘若	有關申請。 遵守本計劃之計劃條款。 ation contained in this Form. 本人承諾如z ations relating to anti-money laundering che re satisfactory evidence, further documentat ation is received. 本人明白須就現行打擊
(Must be 必須與 Please Pension Bank Co	ure of Member 成員簽署 e identical to the Approved Trustee's record u 核准信託人的記錄相符) e return the completed Form by mail to: Services (INV) pnsortium Trust Company Limited usco Tower, 183 Queen's Road Central, Hong Kong	銀聯信託 退休金服	朝 妥的表格寄回: (有限公司 (務 (INV) (大道中 183 號中遠大廈 18 樓

Date:

銀聯信託專用:

Date Checked:

Date Inputted: