

BCT Strategic MPF Scheme BCT強積金策略計劃
TAX DEDUCTIBLE VOLUNTARY CONTRIBUTIONS (TVC) ACCOUNT
PAYMENT NOTE AND CHANGE OF CONTRIBUTION DETAILS FORM
可扣稅自願性供款(TVC)帳戶
供款及更改供款詳情表格

Please note 請注意：

- ◆ Read the offering documents (including the Key Scheme Information Document and the MPF Scheme Brochure) (“Offering Documents”) of BCT Strategic MPF Scheme (“the Plan”) carefully before completing this form by visiting our website: www.bcthk.com. 填寫此表格前，請先細閱BCT強積金策略計劃(「本計劃」)的要約文件(包括主要計劃資料文件及強積金計劃說明書)(「要約文件」)。請瀏覽此網站：www.bcthk.com以閱覽該等文件。
- ◆ 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 such application, 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。由於處理有關申請需要一定的時間，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) 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指示。
- ◆ Should you have any questions when completing this Form, please contact BCTCall Member Hotline at (852) 2842 7878. 如閣下於填寫表格時有任何疑問，請致電BCT積金熱線(852) 2842 7878查詢。

Section 1 – Scheme Member Details 第1部份 – 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

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

Section 2 – Change of Tax Deductible Voluntary Contributions Details
第2部份 – 更改可扣稅自願性供款詳情

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

2A. Regular Monthly Contributions 定期供款

- I would like to **stop** the Regular Monthly Tax Deductible Voluntary Contributions
 本人希望**停止**定期每月可扣稅自願性供款

2B. Regular Monthly Contributions 定期供款

I would like to change my Regular Monthly Tax Deductible Voluntary Contributions amount to HK\$ 港幣 _____ ^ △ ##
本人希望把本人的定期每月可扣稅自願性供款款額改為

^ Monthly regular contribution must be made in the form of direct debit from a bank account in Hong Kong with a minimum amount of **HK\$300**. Please complete the details below and the enclosed Direct Debit Authorisation Form. It may take 2 to 6 weeks to process your instruction. Please consult your banking officer if any service fee will be charged by your bank. The Trustee will send a confirmation letter to you notifying the date for the first payment to be debited from your bank account. 每月定期供款必須以直接付款方式從香港銀行帳戶支付，最低供款額為**300 港元**。請填妥以下資料及附頁的直接付款授權書。處理有關指示約需時二至六星期。請聯絡閣下的銀行主任以了解銀行在此服務上會否收取任何費用。受託人會發出確認通知書，通知首次從閣下銀行帳戶扣除供款的日期。

Notes 請注意：

△ Third party contributions and Joint Name Account contributions are not acceptable. 不接受第三者供款及聯名帳戶供款。
"Monthly Direct Debit Date" will be the **20th day** of each month. If the direct debit day is a public holiday, Saturday, gale warning day or black rainstorm warning day, it will be the following business day. 「每月直接付款日期」將為每月**二十日**。如直接付款日為公眾假期、星期六、烈風警告日或黑色暴雨警告日，則順延至隨後的工作天。

The source of funds for captioned application is from: 上述申請的資金來源是從：(Please ✓ as appropriate 請在適當的空格填上✓號)

- | | |
|--|--|
| <input type="checkbox"/> Salary 薪酬 | <input type="checkbox"/> Investment return 投資回報 |
| <input type="checkbox"/> Personal savings 個人存款 | <input type="checkbox"/> Investment matured 已到期的投資產品 |
| <input type="checkbox"/> Inheritance 遺產 | <input type="checkbox"/> Others 其他 |
| <input type="checkbox"/> Sale of property 出售物業 | (please specify 請說明) : _____ |

2C. Lump Sum Contributions 整筆供款

The minimum amount of each lump sum contribution is **HK\$500**. Do not send us cash or pay by cash / bank-in the cheque at our designated bank branches as it would delay the processing time. Please also complete the details below for processing. 每次整筆最低供款額為**500 港元**。請勿郵寄現金或於我們的特定銀行分行遞交現金 / 存入支票，此舉將會延遲處理有關申請的時間。請填妥以下有關資料以便處理。

Contribution Amount 供款金額 HK\$ _____ 港元

Payment Method △ 付款方法 △

Notes 請注意：△ Third party contributions and Joint Name Cheque / Account contributions are not acceptable. 不接受第三者供款及聯名支票 / 帳戶供款。

(Please ✓ as appropriate 請在適當的空格填上✓號)

- | | |
|--|--|
| <input type="checkbox"/> HKD Cheque 港元支票

Payee 收款人： Bank Consortium Trust Company Limited as Trustee of BCT Strategic MPF Scheme | <input type="checkbox"/> Telegraphic Transfer in HKD 港元電匯**

Bank Name 收款銀行 : Citibank,N.A. Hong Kong
SWIFT Code : CITIHKHX
A/C Name 帳戶名稱 : Bank Consortium Trust Company Limited as Trustee of BCT Strategic MPF Scheme

A/C No. 帳戶號碼 : 006-391-61086592 |
|--|--|

Notes 請注意：

Please quote your full name, HKID / Passport number and Member Account Number at the back of cheque as reference. 請在支票背面清楚列明閣下的姓名、香港身份證 / 護照號碼及成員帳戶號碼以作參考。

Fund Units will be subscribed after cheque clearing.
基金單位將於支票兌現後，才能辦理基金單位之認購。

Notes 請注意：

Please quote your full name, HKID Card / Passport number and Member Account Number on the TT advice as reference. 請在電匯收條上清楚列明閣下的姓名、香港身份證 / 護照號碼及成員帳戶號碼以作參考。

** Please attach a copy of the TT advice. 請附上電匯收條副本。

The source of funds for captioned application is from: 上述申請的資金來源是從：(Please ✓ as appropriate 請在適當的空格填上✓號)

- | | |
|--|--|
| <input type="checkbox"/> Salary 薪酬 | <input type="checkbox"/> Investment return 投資回報 |
| <input type="checkbox"/> Personal savings 個人存款 | <input type="checkbox"/> Investment matured 已到期的投資產品 |
| <input type="checkbox"/> Inheritance 遺產 | <input type="checkbox"/> Others 其他 |
| <input type="checkbox"/> Sale of property 出售物業 | (please specify 請說明) : _____ |

Important Note 重要事項：

*Please note that if the total amount of TVC made in a year of assessment exceeded the maximum tax deductible limit, the amount exceeded will not be eligible for tax deduction and TVC Account (including the amount exceeding the deductible limit as mentioned above) is subject to the same vesting and preservation rules and withdrawal restrictions applicable to MPF mandatory contribution. 請注意，如在一課稅年度內所作出的可扣稅自願性供款總額超過可扣稅的最高限額，超過可扣稅總額的部份將不獲扣稅優惠及此可扣稅自願性供款帳戶(包括前述超過可扣稅總額的部份)須受強制性供款適用的相同歸屬與保存規則及提取限制所規限。

*Fund Units will be subscribed according to your current investment mandate. 基金單位將按閣下現有的投資指示作出認購。

*The Mandatory Provident Fund Schemes Authority may verify the eligibility of the TVC Account holders. 強制性公積金計劃管理局可能會核實可扣稅自願性供款帳戶持有人資格。

*Please note that where a TVC Account has nil TVC balance and has no activity for 365 days, the membership of the TVC member may be terminated. 請注意，在可扣稅自願性供款帳戶沒有可扣稅自願性供款結存及經 365 日沒有任何交易時，可扣稅自願性供款成員的參與將會終止。

2D. Change of Investment Instruction 更改投資安排

Change of the Investment Mandate for future Regular Monthly and Lump Sum contributions for Tax Deductible Voluntary Contributions: 更改日後定期每月及整筆供款的可扣稅自願性供款投資指示：

If you want to know the latest Investment Allocation Percentage of your Tax Deductible Voluntary Contribution Account, please logon our website at www.invesco.com/hk or the IVRS, or call BCTCall Member Hotline at 2842 7878 for information. 如閣下想了解最新的可扣稅自願性供款帳戶的投資配置百分比，請登入我們的網站：www.invesco.com/hk 或互動話音系統，或致電BCT積金熱線2842 7878查詢。

If you want to change your Investment Mandate of your Tax Deductible Voluntary Contribution Account, please perform it through our website or IVRS, or by filling in and submitting the Tax Deductible Voluntary Contribution (TVC) Account "Asset Switch / Change of Investment Mandate Form". 如閣下要更改可扣稅自願性供款帳戶的投資指示，請透過我們的網站或互動話音系統辦理，或填寫及遞交可扣稅自願性供款(TVC)帳戶的「資產轉換 / 更改投資指示表格」。

Section 3 – Authorization and Declaration 第3部份 – 授權及聲明

I declare that 本人聲明

1. All information in this Form is accurate and complete. 本表格所載資料均屬正確無訛且無缺漏。
2. I understand that the Trustee may not be able to process this application if I fail to provide any information requested in this Form. 本人明白倘若本人未能提供本表格所需的資料，受託人將可能無法處理有關申請。
3. I have read and agree to comply with the governing rules of the Plan. 本人已瞭解並同意遵守本計劃之計劃條款。
4. I undertake to notify the Trustee as soon as possible of any changes to the information contained in this Form. 本人承諾如本表格內所載之資料有任何更改，將盡早通知受託人。
5. I agree that any notice of cancellation or variation of the Direct Debit Authorization, if applicable, which I may give to the Trustee shall be made in writing and be given at least seven working days prior to the date on which such cancellation / variation is to take effect. 本人同意，本人向受託人所發出任何有關直接付款授權(如適用)之轉變或取消的通知，均須以書面通知及於有關取消 / 更改生效日期前最少七個工作天發出。
6. I understand that I will be required to provide evidence required by applicable laws and regulations relating to anti-money laundering checks. If the Trustee and / the Sponsor does not receive satisfactory evidence, further documentation may be requested, and the relevant transaction shall not be processed until such documentation is received. The Trustee and / or the Sponsor reserve the right not to accept the Tax Deductible Voluntary Contribution and / or the captioned application. 本人明白本人須就打擊洗黑錢有關法例及規則的要求而提供證明。倘若受託人及 / 或保薦人未能收到滿意之證明，則可要求提供進一步資料，而有關交易謹在接獲有關資料後方可進行。受託人及 / 或保薦人保留不接受可扣稅自願性供款及 / 或上述之申請之權利。

7. I acknowledge that it is my duty and responsibility to apply for tax deduction from the Inland Revenue Department and keep track of the tax deductible limit. 本人確認，本人有義務及責任向稅務局申請稅款寬減及了解免稅限額。
8. I declare that I have not filed for bankruptcy or been adjudicated bankrupt. I understand that the protection of accrued benefits under section 16 of the MPFSO is not applicable to TVC Account, which means TVC balances will generally be vested in the trustee-in-bankruptcy or official receiver as part of the property of the TVC member who has become bankrupt. 本人聲明，本人並沒有申請破產或被宣告破產。本人明白根據強制性公積金計劃條例（第485章）（第16條）對累算權益的保障並不適用於可扣稅自願性帳戶，意即可扣稅自願性供款所得累算權益一般將作為破產成員財產的一部分而歸屬於破產案受託人或破產管理署署長。

Signature of Member 成員簽署

*(Must be identical to the Approved Trustee's record
必須與核准受託人的記錄相符)*

Date 日期

Please return the completed Form by mail or by fax to:

Pension Services (INV)
Bank Consortium Trust Company Limited
18/F Cosco Tower,
183 Queen's Road Central, Hong Kong

Fax: (852) 2736 1966

請將填妥的表格郵寄或傳真至：

銀聯信託有限公司
退休金服務 (INV)
香港皇后大道中183號
中遠大廈18樓

傳真：(852) 2736 1966

BCT use only 銀聯信託專用：	Document Received Date:	Inputted By:	Checked By:	Remarks:
		Date Inputted:	Date Checked:	