

- 請以正楷填寫。Please complete in BLOCK LETTERS.
- 請於適當位置加上“✓”號。Please “✓” the appropriate box.
- 中銀國際英國保誠信託有限公司(「受託人」)於收到閣下填妥的表格後十四天內處理閣下的指示。Your instructions will be processed within 14 days after BOCI-Prudential Trustee Limited (the “Trustee”) receives your duly completed form.

(I) 計劃成員資料 PERSONAL DETAILS OF SCHEME MEMBER

1. 成員姓名 (全名) Member Name (Full Name)	英文 English
	中文 Chinese
2. 香港身份證/護照號碼 HKID Card/Passport No.	
3. 僱主名稱 Employer Name	

閣下授意披露及轉移的資訊將包括但不限於 Information that you wish to be disclosed and transferred shall include but not limited to:

- 個人資訊 Personal Information: 電話號碼、電郵地址及傳真號碼 Telephone number, email address and fax number
- 戶口資訊 Account Information: 計劃生效日期、合約狀況、合約編號、累算權益、總戶口結餘、基金戶口結餘、基金交易詳情、計劃轉移金額、投資分佈、供款紀錄及任何關於賬戶的操作 Scheme effective date, contract status, contract number, accrued benefits, total account balance, account balance by fund, details of fund transaction, transfer-in amount, investment allocation, contribution history and any operations of the Accounts

(II) 撤銷授權賬戶類別 REVOCATION OF MPF ACCOUNT(S) AUTHORIZED

本人現申請撤銷之前的披露資料予強積金中介人同意書 I request to revoke my previous consent of disclosure of particulars to MPF Intermediary in respect of:

1. 賬戶類別 Account Type	僱員供款賬戶 Employee Contribution Account
2. 僱主 / 成員帳戶號碼 Employer / Member Account No.	

(III) 計劃成員聲明及簽署 SCHEME MEMBER DECLARATION AND SIGNATURE

本人現撤銷有關同意受託人披露及轉移上列指定個人資訊及戶口資訊 (統稱「資訊」) · 予本人僱主指定強積金中介人 (僱主強積金中介人) 以協助管理之強積金戶口之同意書。I revoke my consent to authorize the Trustee to disclose and transfer my personal information together with my account information as specified above (collectively, the “Information”) to the MPF intermediary engaged by my employer (“ER MPFI”) in order to provide MPF related assistance to me.

成員簽署 Member Signature

成員姓名 Member Name

日期 Date (日 DD/月 MM/年 YYYY)

公司專用 For Official Use Only			
Input by :	Date :	Verified by :	Date :