

To致: Bank Consortium Trust Co. Ltd. 銀聯信託有限公司
c/o oOo Securities (HK) Group Limited (formerly known as orientiert XYZ Securities Limited)

FORM: IU (MEM) – TCM

奧聯信託集團(香港)證券有限公司 (前稱orientiert XYZ Securities Limited)
Room 3301, Tower One, Lippo Centre, No.89 Queensway, Hong Kong 香港金鐘道89號力寶中心1座33樓3301室
Fax 傳真: (852) 2172 0999 AMTD MPF Hotline AMTD 強積金熱線: (852) 2172 0909 Website 網址: www.oogroup.xyz

AMTD MPF Scheme – Information Update Form (For Scheme Member)

AMTD 強積金計劃 – 資料更新表格 (計劃成員適用)

Note 注意

- Please mark “✓” in the appropriate box. 請於適用的方格內填上「✓」號。
- Please countersign any alterations made in this form. 如須作出任何刪改, 請於刪改之位置旁簽署。

Part I. Member Details 第I部份 成員資料		
Name of Plan 計劃名稱	AMTD MPF Scheme AMTD 強積金計劃	Participating Plan No. 參與計劃編號
		Also apply the relevant update [▼] to all account(s) <input type="checkbox"/> under my name in the selected plan(s) 有關更新 [▼] 亦適用於所選計劃下本人名下的所有戶口
Name of Member 成員姓名	English (Mr / Ms / Mrs*)	Membership No. 成員編號
	中文 (先生 / 女士 / 太太*)	
Contact Phone No. 聯絡電話號碼		HKID Card No. 香港身份證號碼
E-mail Address 電郵地址		Passport No. (ONLY for member without HKID Card) 護照號碼 (本欄僅供沒有香港身份證的成員填寫)

Part II. Change of Personal Particulars 第II部份 更改個人資料		
Items 類別	Updated Information 最新資料	
<input type="checkbox"/> Change of Name of Member 更改成員姓名 (Please provide the certified true copy of identification document, including Deed Poll and HKID Card / Passport, etc. 請提供正本核實的改名契及身份證明文件副本, 如香港身份證 / 護照等。)	Surname 姓 (English 英文) _____ First Name 名 (English 英文) _____ Chinese Name 中文姓名 _____	
<input type="checkbox"/> Change of Date of Birth [†] 更改出生日期 [†]	____ / ____ / ____ D 日 / M 月 / Y 年	<input type="checkbox"/> Change of Nationality 更改國籍 _____
<input type="checkbox"/> Change of Residential Address 更改住址 (“In-care-of” address and P.O. Box address will not be accepted. All correspondence will be sent to this address. 「轉交」地址及郵政信箱恕不接受, 所有通訊將寄往此地址。)	Flat / Room 室 _____ Floor 樓 _____ Block 座 _____ Building / Estate Name 大廈 / 屋苑名稱 _____ Street / Road 街道 _____ District 地區 _____ <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Hong Kong 香港 <input type="checkbox"/> Kowloon 九龍 <input type="checkbox"/> New Territories 新界 </div> <div> Overseas (Country and City)[▽] 海外 (國家及城市)[▽] <input type="checkbox"/> China 中國 _____ (City 城市) <input type="checkbox"/> Others 其他 (Please specify 請說明) _____ (Country 國家) _____ (City 城市) </div> </div>	

* Delete as appropriate 請刪去不適用者

▼ The relevant update applies to Part II only. 有關更新只適用於第II部份。

[†] Please note that if you have selected the Default Investment Strategy (“DIS”) as your Investment Mandate, if the updated information indicates that your age is between 50 to 64, and it falls into another age band as referred to in the DIS de-risking table, BCTC will adjust the asset allocation between the AMTD Invesco Core Accumulation Fund and AMTD Invesco Age 65 Plus Fund according to the DIS de-risking table for any investment in the DIS. If the updated information indicates that your age is 65 or above, your DIS will solely invest in AMTD Invesco Age 65 Plus Fund. The change of date of birth will apply to all account(s) under your name in the selected plan(s). 請注意如您已選擇預設投資策略 (「預設投資」) 作為您的投資委託, 若您更新資料後表明您是50至64歲間, 並落入在預設投資策略預設投資降低風險列表中提及的另一年齡組別, 銀聯信託將根據該列表調整任何投資於預設投資下的AMTD 景順核心累積基金與AMTD 景順65歲後基金的資產配置比例。如您更新資料後表明您已年滿65歲, 您的預設投資會全數投資於AMTD 景順 65歲後基金。更改出生日期將適用於閣下在所選計劃下的所有戶口。



Part II. Change of Personal Particulars 第II部份 更改個人資料 (Continued 續)

<input type="checkbox"/> Change of Contact Details 更改聯絡資料	<input type="checkbox"/> E-mail Address 電郵地址															
	<input type="checkbox"/> Fax No. 傳真號碼															
	Telephone No. 電話號碼	Country Code 國家號碼	Area Code 地區號碼	Phone No. 電話號碼	Ext. 內線											
	<input type="checkbox"/> Local Mobile 本地手提															
	<input type="checkbox"/> Business 辦公室															
<input type="checkbox"/> Residential 住宅																
<input type="checkbox"/> China / Overseas 中國 / 海外																
<input type="checkbox"/> Others 其他																

Important Note 重要提示:

If your information update, such as change of address or telephone number, causes the country / countries and / or jurisdiction(s) of tax residency previously identified being incorrect or incomplete, please provide a suitably updated self-certification within 30 days of such change in circumstances.

若您的資料更新（如地址或電話號碼）導致之前確定的國家及 / 或司法管轄區的稅務居民身份資料不正確或不完整，您必須在改變後的30 天內提供最新的自我證明。

Part III. Means of Communication 第III部份 通訊方式

Please indicate your selection of the service by ticking “✓” the box. 請在方格內加上「✓」號以表示選擇此服務。

1. Change of your preferred language for future correspondence

選擇 / 更改日後通訊的語言

☐ English 英文 ☐ Chinese 中文

If preferred language is not selected, Chinese will be used for future correspondence.

如沒有選擇，我們將會以中文與您通訊。

2. MPF Account Balance SMS Service (Remark 1, 2 and 3)

強積金計劃戶口結餘短訊提示服務（備註1, 2 及3）

☐ New Application 首次申請

☐ Change of Contact Details 更改聯絡資料

Please provide your local mobile phone no. in Part II for the purpose of providing such service.

請於第II 部份提供您的本地手提電話號碼。

☐ Service Cancellation 服務取消

I hereby confirm to cancel the MPF Account Balance SMS Service. 本人確認取消強積金戶口結餘短訊提示服務。

(Note 注意: Cancellation shall take effect after five business days upon receipt of your instruction. 服務將於本公司接獲您的取消指示當天起計五個工作天後取消。)

3. ☐ Option for receiving Relevant Communications in electronic form — Please tick “✓” this box to consent to our giving communications for the purposes of the Mandatory Provident Fund Schemes Ordinance (“Relevant Communications”) in electronic form, as we may determine to be appropriate. (Remark 4)

選取以電子形式收取有關通訊 — 請於方格加上「✓」號以同意我們以電子形式向您送出（我們認為合適的）與「強制性公積金計劃條例」相關的通訊（「有關通訊」）。（備註4）

Remarks 備註

1. In the event that MPF accrued benefits held under the regular employee contribution account are required to be automatically transferred to a new personal account within the same plan after cessation of employment, this value added service will continue to apply to the new personal account unless otherwise instructed. 假如一般僱員供款帳戶內之強積金累算權益在僱員終止受聘後需自動轉移至同一計劃下新開立之個人帳戶，此項增值服務亦適用於該新開立之個人帳戶（另有指示除外）。

2. The figures will be calculated by using the fund price as at the last business day of previous month. Information on account balance is for reference only. 數額將根據上月最後一個工作天之基金價格計算。戶口結餘資料僅供參考。

3. No SMS Account Balance will be provided if the accrued balance is less than \$1.00. 若戶口結餘少於\$1.00，將不會收到「帳戶結餘短訊」。

4. (i) By choosing this option, you agree to receive Relevant Communications in electronic form, as we may determine to be appropriate, so that, when we determine to issue to you a Relevant Communication in electronic form, we may not issue it to you in physical form, and vice versa. Relevant Communications refer to all documents, statements or notices issued by us for the purposes of the Mandatory Provident Fund Schemes Ordinance (“Ordinance”) from time to time, including, without limitation, regulatory statements / notifications (such as member benefit statements, notices to members, principal brochures, addenda to principal brochures and fund performance fact sheets).

選擇此選項即表示您同意以電子形式接收（我們認為合適的）有關通訊，因此，當我們決定以電子形式向您發出有關通訊時，我們可不以實體形式向您發出該有關通訊，反之亦然。有關通訊是指我們按「強制性公積金計劃條例」（「條例」）不時發出的所有文件、報表或通知，包括但不限於監管報表 / 通知（如成員權益報表、成員通知、總說明書、總說明書的補編及基金表現報告）。

(ii) Please note that whether or not this option is chosen, communications not for the purposes of the Ordinance may, in any event, be issued by us to you in electronic form only. Such communications include, without limitation, semi-annual benefit statements, fund switching confirmations, changes of investment mandate confirmation, newsletters, information leaflets and promotional materials.

請注意，不論您是否選擇此項，我們只會以電子形式向您發出非條例相關的通訊。此通訊包括但不限於半年度成員權益報表、基金轉換確認書、更改投資委託確認書、通訊、單張資料及宣傳品。

(iii) For the option to be effectively made, please (on top of ticking the box above) provide your contact information for electronic communication, including the email address and mobile phone number required to be filled in above. If you wish to update your contact information for electronic communication, please give us at least 14 days prior notice by submitting your request through our website; by returning the completed Information Update Form, or by calling our AMTD MPF Hotline at 2172 0909 (and the 14 days will start to run from our actual receipt of your request).

為了令此選項能夠有效實行，請（除別選以上方格外）提供您的電子聯絡資料以作電子通訊之用，包括於上方填寫您的電郵地址和手提電話號碼。如果您想更新您的電子聯絡資料，請在不少於14 天前透過我們的網站、交回填妥的「資料更新表格」或致電AMTD 強積金熱線 2172 0909 通知我們（該14 天將從我們收到您的指示開始計算）。

(iv) Please note that the option, when chosen, will apply to all of your accounts under the same plan, including all existing and future accounts and, for the avoidance of doubt, where MPF accrued benefits held under a regular employee contribution account are automatically transferred to a new personal account within the same plan after cessation of employment, the option will continue to apply to the new personal account unless otherwise instructed. If you wish to terminate the option, please give us at least 14 days prior notice by submitting your termination notice through our website or by returning the completed Information Update Form (and the 14 days will start to run from our actual receipt of your termination notice).

請注意，選擇此選項將適用於您在相同計劃下的所有帳戶，包括所有現有和未來帳戶，並且為免生疑問，此選項將繼續適用於您離職時在一般僱員供款帳戶下持有的強積金累算權益自動轉移到同一計劃下新的個人帳戶（另有指示除外）。如果您想終止此選項，請在不少於14 天前透過我們的網站、或交回填妥的「資料更新表格」提交終止通知書（該14 天將從我們收到您的終止指示開始計算）。

☐ Service Cancellation 服務取消

I hereby confirm to cancel the option for receiving the Relevant Communications in electronic form. 本人確認取消選取以電子形式收取有關通訊。

Trustee & Administrator 受託人及行政管理人: Bank Consortium Trust Company Limited 銀聯信託有限公司

18/F Cosco Tower, 183 Queen's Road Central, Hong Kong 香港皇后大道中183號中遠大廈18樓

Part IV. Change of Contribution Mode (Only Applicable to Self-employed Person)**第IV部份 更改供款方式（只適用於自僱人士填寫）****For Self-employed Person using Direct Debit Service only**

只適用於使用直接付款方式之自僱人士

☐ The payment date is deemed to be 30 June of each year, or if specified, the _____ day of June of each year.

直接付款日期以每年6月30日為準，或指定每年6月的_____日。

☐ The payment date is deemed to be the last day of each month, or if specified, the _____ day of each month.

直接付款日期以每月之月底為準，或指定每月的_____日。

Important Note 重要提示

For monthly contribution, if 29th, 30th or 31st is selected, the Monthly Direct Debit Date will be the **last day of each month**. 如選擇月供及每月之29日、30日或31日為直接付款日，「每月直接付款日期」將為每月最後一天。

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. If the direct debit day falls on a Saturday which is also the last date of the month, it will be the preceding business day. 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日。如直接付款日為每月最後一天並為星期六，則提早一個工作日。

Part V. Personal Information Collection Statement 第V部份 收集個人資料聲明

The personal data provided by or in respect of Members and Participating Employers of the AMTD MPF Scheme (the "Scheme") (concerning application records and operational records and / or their dealing / transaction details records) will only be accessed and handled by properly authorised staff of Bank Consortium Trust Company Limited ("BCTC", the trustee of the Scheme), the sponsor of the Scheme (currently oOo Securities (HK) Group Limited (formerly known as orientiert XYZ Securities Limited)("orientiert")) and their properly authorised service providers, employees, officers, directors and agents, and auditors of the Scheme, and may be used, disclosed and / or transferred (whether in or outside Hong Kong) to such persons as BCTC or any of its service providers may consider necessary, including governmental authorities and regulators, for any of the following purposes: (i) exercising or performing the functions conferred or imposed by or under or for the purposes of the Mandatory Provident Fund Schemes Ordinance ("Ordinance"); (ii) providing services in respect of Mandatory Provident Fund and the Scheme including the processing, administering, managing, and analysing of their, as the case may be, contributions, accrued benefits and portfolios and direct marketing of Mandatory Provident Fund services; (iii) improving the provision of Mandatory Provident Fund services by BCTC to customers generally (including the facilitation of the provision of Mandatory Provident Fund services to enable the customers of BCTC generally to access Mandatory Provident Fund (or other) account details, for example, through the internet or other means); (iv) compliance with applicable laws and regulations, and court order and / or

(v) any other purposes for the exercise or performance of the above mentioned functions. If there is any change in the information provided, BCTC should be notified as soon as practicable. Failure to provide the information requested may result in BCTC being unable to process the instructions. All such information may be retained after Members and Participating Employers ceased to participate in the Scheme.

Members and Participating Employers have a right, without any charge, to request access to and correction of any personal data or to request that personal data about them not be used for direct marketing purposes. Requests can be made in writing to the Data Protection Officer at BCTC, 18/F Cosco Tower, 183 Queen's Road Central, Hong Kong. Under the Personal Data (Privacy) Ordinance, Members and Participating Employers have the right to obtain a copy of information held about Members and Participating Employers and for which the Members and Participating Employers may be charged a fee.

由AMTD 強積金計劃（「本計劃」）的成員及參與僱主所提供或相關之個人資料（有關申請及運作記錄）及 / 或他們的買賣 / 交易細節記錄僅供銀聯信託有限公司（「銀聯信託」，本計劃之受託人）、本計劃之保薦人（現為奧利安集團（香港）證券有限公司（前稱orientiert XYZ Securities Limited）（「orientiert」）及它們正式授權之服務供應商、僱員、主任、董事及代理及本計劃之核數師使用及處理，及在銀聯信託或其任何服務供應商認為有需要時，或被使用、披露及 / 或轉移（在香港境內或境外）予個別人士，包括政府機關及監管機構作以下列任何之目的：（一）行使或執行強制性公積金計劃條例（「條例」）下所授予或施加之職能或根據該條例的目的而行使或執行職能；（二）提供強制性公積金及本計劃的服務包括處理、掌管、管理及分析供款、累算權益及投資組合，視乎情況而定，及直銷強制性公積金服務；（三）改善銀聯信託提供予客戶一般之強制性公積金服務（包括協助提供強制性公積金服務以令銀聯信託之客戶可經例如互聯網或其他途徑處理強制性公積金（或其他）戶口資料）；（四）遵守適用之法律及規例及法院命令及 / 或（五）任何以行使或執行上述職能作目的之用途。如所提供資料有所變更，應在可行的情況下儘快通知銀聯信託。未能提供所需資料可能導致銀聯信託不能處理有關指示。於成員及參與僱主停止參與本計劃後，受託人仍可保留上述所有資料。

成員及參與僱主，在不設任何收費下，有權要求查閱或更改任何個人資料或要求個人資料不被用作直銷之用。可以書面聯絡銀聯信託之資料保護主任，香港皇后大道中183號中遠大廈18樓。根據個人資料（私隱）條例，成員及參與僱主有權在支付費用的情況下，索取一份有關成員及參與僱主的資料副本。

Part VI. Authorisation, Declaration and Consent 第VI部份 授權、聲明及同意

By signing this document:

- (1) I understand and agree to the terms of the Personal Information Collection Statement as set out in this form.
- (2) I undertake that if there is any change in the information so provided, I shall notify BCTC and oOo Securities (HK) Group Limited as soon as reasonably practicable.
- (3) I declare that to the best of my knowledge and belief, the information given in this form and / or its attachment(s), if any, is correct and complete.
- (4) I hereby agree to indemnify BCTC against any actions, proceedings, claims, losses, damages, costs or expenses which may be brought against BCTC or suffered or incurred by BCTC arising either directly out of or in connection with BCTC accepting facsimile instructions or e-mail instructions and acting thereon, whether or not the same are confirmed by me in writing. Notwithstanding the above, BCTC has the right to determine which forms or other documents of instructions may or may not be accepted by facsimile or e-mail.
- (5) I expressly consent to the use of my personal data (name, telephone no., fax no., e-mail address, address and account records) for the purpose of direct marketing of Mandatory Provident Fund Services (and ancillary MPF products) by BCTC and BCTF (or their employees or agents); but I understand that BCTC and BCTF cannot make such use of my personal data without my consent and will cease upon my written or verbal request. I further understand that if I do not wish to consent to my personal data being used for the said direct marketing purpose, I should indicate that no consent is given, by ticking this box. ☐

經簽署本文件:

- (1) 本人明白及同意於此表格之收集個人資料聲明條款。
- (2) 本人承諾若所提供之資料有任何更改，將儘快通知銀聯信託及奧韜懿集團(香港)證券有限公司。
- (3) 本人聲明，盡本人所知及所信，本表格及隨附之文件（如有）所提供的資料均屬正確無訛且無缺漏。
- (4) 本人同意銀聯信託不論在有否得到本人的書面確認下均可接受及處理傳真指示或電郵指示及根據該等指示處理有關事宜，本人亦同意賠償銀聯信託因接受或處理該等傳真指示或電郵指示而直接或間接導致銀聯信託遭受或承受的任何行動、訴訟、理賠、損失、損害、成本或費用。儘管以上所述，銀聯信託有權決定何種表格或其他指示文件能否以傳真方式或電郵方式傳遞。
- (5) 本人即明確表示同意銀聯信託及銀聯金融（及其僱員或代理）使用本人的個人資料（姓名、電話號碼、傳真號碼、電郵地址、地址及戶口記錄）作直銷強制性公積金服務（及有關強積金的產品）的目的，但本人明白倘本人不同意銀聯信託及銀聯金融不能如此使用本人的個人資料及倘接獲本人之書面或口頭要求，該使用將停止。本人亦明白如本人不欲將本人的個人資料用作上述直銷用途，本人應在末段的方格內加上“√”號，以表示不同意。☐

S.V.

Signature of Applicant 申請人簽署

Date (D/M/Y) 日期（日/月/年）

Internal Use Only 內部專用

Date Received:

Input By:

Verified By:

Remarks: