

Contract No. 合約編號: SD123456

 Employer Name 僱主名稱: ABC COMPANY

1. Fill in Contract No., Company information and Contribution Period

 Contact Person 聯絡人: Ms. Chan

Pay Centre (if any) 付款中心(如有) \_\_\_\_\_

 Contribution period 供款期: 01/01/2019 to 31/01/2019  
DD 日/MM 月/YYYY 年

 Telephone No. 電話號碼: 2345-6789
**1. Existing Members 現行會員/成員**

	Members Information 會員/成員資料		Relevant Contribution Period 有關供款期		Relevant Income 有關入息 (HKD 港元)	Monthly Income 每月入息 (HKD 港元) (for VC only 只供自願性供款)	Mandatory Contribution 強制性供款 (HKD 港元)		Voluntary Contribution 自願性供款 (HKD 港元)		Contribution Surcharge 供款附加費 (if any 如有)	Last Day of Employment 最後受僱日期 (DD 日/MM 月/YYYY 年)	Termination Reason Code# 離職原因編碼#	SP/LSP Offset <sup>^</sup> 抵銷遣散費/長期服務金 <sup>^</sup> <small>(If no tick, this means no refund to employer is required. 如沒有選擇, 即表示無需退還予僱主)</small>
	HKID/Passport /Member No. 香港身份證/護照/會員/成員號碼	Member Name 會員/成員姓名 (Last name, First name 姓、名)	From 由 (DD 日/MM 月/YYYY 年)	To 至 (DD 日/MM 月/YYYY 年)			Employer 僱主	Employee 僱員	Employer 僱主	Employee 僱員				
1	A123456(7)	CHAN TAI MAN	01/01/2019	31/01/2019	\$10000		\$500	\$500				31/01/2019	10	<input type="checkbox"/> Y 是
2	B234567(8)	WONG SIU YIN	01/01/2019	31/01/2019	\$20000		\$1000	\$1000						<input type="checkbox"/> Y 是
3	C876543(2)	LAM KWOK FAI	01/01/2019	31/01/2019	\$30000		\$1500	\$1500						<input type="checkbox"/> Y 是
4														<input type="checkbox"/> Y 是
5														<input type="checkbox"/> Y 是
6														<input type="checkbox"/> Y 是
7														<input type="checkbox"/> Y 是
8														<input type="checkbox"/> Y 是
9														<input type="checkbox"/> Y 是
10														<input type="checkbox"/> Y 是

2. Fill in existing employees' HKID or member no. and member name

 3. Fill in and confirm the relevant income for the month and calculate the amount of contribution (The mandatory contribution is **5%** of the relevant income. Please note that there is a **minimum and maximum relevant income level** for mandatory contribution. Please visit MPFA website for more details)

 4. Termination employees need to report  
 i. Last Day of Employment and ;  
 ii. Termination Reason (please refer to important notes) and;  
 iii. Any SP/LSP offset is required? (If yes, please submit [Re: Request \*SP/LSP Offsetting] Form at the same time)

(1) Sub-total 小計

(1) Total 合計

Please make sure contribution is made for ALL eligible employees. Employees with no relevant income in the relevant contribution period, please put "0" in the relevant income and contribution columns. 請確保為所有合資格僱員作出供款。若僱員於相關供款期內並無有關入息, 請於有關入息及供款欄填上 "0"。

If this Remittance Statement has been sent by email or fax, please do not send the original form by post to avoid duplication. 若已經以電郵或傳真方式遞交此供款結算書, 請勿將正本寄回以免重複。

2. New Members 新會員/成員 (Should submit membership enrolment form(s) to us. 須遞交成員登記表格予本公司。)

Contract No. 合約編號: **SD123456**

Members Information 會員/成員資料		Relevant Contribution Period 有關供款期		Relevant Income 有關入息 (HKD 港元)	Monthly Income 每月入息 (HKD 港元) (for VC only 只供自願性供款)	Mandatory Contribution 強制性供款 (HKD 港元)		Voluntary Contribution 自願性供款 (HKD 港元)		Contribution Surcharge 供款附加費 (if any 如有)
		From 由 (DD 日/MM 月/YYYY 年)	To 至 (DD 日/MM 月/YYYY 年)			Employer 僱主	Employee 僱員	Employer 僱主	Employee 僱員	
1	Member Name (Last name, First name) <input type="checkbox"/> MR 先生 <input checked="" type="checkbox"/> MS 女士 會員/成員姓名(姓、名) <b>FONG MEI KUN</b>	01/11/2018	30/11/2018	\$25,000		\$1,750	\$0			\$87.5
	HKID/Passport No. 香港身份證/護照號碼 <b>D987654(3)</b>									
	Residential Address 住宅地址 <b>FLAT 1234 12/F ABC COURT</b> <b>1 GOOD ROAD, KWUN TONG, KLN HK</b>	31/12/2018	31/12/2018	\$25,000		\$1,750	\$1,750			\$175
	Date of Birth (DD/MM/YYYY) 出生日期(日/月/年) <b>01/01/1970</b>	Date of Employment (DD/MM/YYYY) 受僱日期(日/月/年) <b>01/11/2018</b>								
	Nationality 國籍 <b>CHINESE</b>	Class (if any) 福利級別(如適用)	31/01/2019	31/01/2019	\$25,000	\$1750	\$1,750			
	<input type="checkbox"/> Intra-group transfer 會員/成員於有聯繫公司轉調 <input type="checkbox"/> Re-employed 重新受僱									
2	Member Name (Last name, First name) <input type="checkbox"/> MR 先生 <input type="checkbox"/> MS 女士 會員/成員姓名(姓、名)									
	HKID/Passport No.									
	Employment (DD/MM/YYYY) (日/月/年)									
	Class (if any) (如適用)									
	Re-employed 重新受僱									
	8. Please enclose authorized signature, company chop and date on the horizontal line to confirm the above information is correct									
						(2) Sub-total 小計	\$5,250	\$3,500		\$262.5
						(2) Total 合計	\$9,012.5			
						(1) + (2) Grand Total 總計	\$15,012.5			

5. Fill in new employees' information, please complete below 6 listed information and submit "Membership Enrolment Form" to us.

- Name
- HKID
- Address
- Date of Birth
- Date of Employment
- Nationality

6. Calculate new employees' contribution (Remarks: new employee is not required to make contribution for first 30 days)

7. According to MPF regulation, if you do not submit contribution on or before contribution due day, employer should pay extra contribution surcharge (5% of mandatory contribution)

We, the Employer, hereby declare and confirm that all the information given is accurate and is given to the best of our knowledge. 本公司(僱主)謹此聲明並確定確，並且盡本公司(僱主)所知而填報。

**X** *chan fu yau*  
Authorized Signature with Company Chop 授權簽署及公司印鑑



**01/02/2019**  
Date 日期

**Payment Method 付款方式:**  
 Autopay 自動轉帳  Cheque 支票 (Cheque No. 支票號碼 **123456**)  
 Bank-in/Bill payment 存入銀行/繳費

**Scheme Name 計劃名稱**  
 Principal MPF – Smart Plan 信安強積金 – 明智之選 PTC – Smart Plan 信安 – 明智之選  
 Principal MPF – Simple Plan 信安強積金 – 易富之選 PTC – Simple Plan 信安 – 易富之選