



SUN LIFE MPF BASIC / COMPREHENSIVE SCHEME  
(Formerly named FWD MPF MASTER TRUST BASIC / COMPREHENSIVE SCHEME)  
EMPLOYER VOLUNTARY CONTRIBUTION CHANGE FORM

永明強積金基本 / 綜合計劃  
(前計劃名稱為富衛強積金集成信託基本 / 綜合計劃)  
僱主自願性供款更改表格

To be completed by Employer 請由僱主填寫

If you opt to make voluntary contributions in respect of your employees, please fill in the following contributions details.  
如果你選擇為你的僱員作出自願性供款，請填寫以下供款詳情。

Scheme Name 計劃名稱	SUN LIFE MPF BASIC / COMPREHENSIVE* SCHEME 永明強積金基本/綜合* 計劃		
Employer Name (English) 僱主名稱 (英文)	_____		
Employer Name (Chinese) 僱主名稱 (中文)	_____	Account No. 帳戶編號	_____

Amendment on Voluntary Contributions 自願性供款更改詳情

(Only complete sections with changes 只需填上須更改部份)

Please tick (✓) the appropriate box(es) 請在適當方格加上 (✓) 號

IMPORTANT NOTES 重要事項:

- Employer's Voluntary Contributions and Employee's Voluntary Contributions in respect of an employee will be ceased immediately upon the Administrator's receipt of the written notification on the adjudicated bankruptcy of the employee. 當行政管理人收到僱員被宣判破產之書面通知時，有關僱員之僱主自願性供款及僱員自願性供款將立即停止。
- At least 1 month's prior notice to the Administrator is required for Employers to make changes to their voluntary contributions. 僱主須於最少一個月前通知行政管理人以更改自願性供款。
- Any changes relating to Mandatory Contributions or Voluntary Contributions that will alter to a member's detriment his/her vested benefits or accrued rights under a registered scheme would require approval from the Mandatory Provident Fund Schemes Authority (the "MPFA") before the change can take effect. 任何與強制性供款或自願性供款有關之修改，若會損害成員在註冊計劃下的既有利益或累積權益，則該項修改須在獲得強制性公積金計劃管理局（“積金局”）的批准後方可生效。
- Under normal circumstances, changes should only be effected on a future date. 在一般情況下，修改的生效日應為將來的日期。
- The MPFA or the Trustee may require additional information, including but not limited to 'Consent by Members' before accepting the changes stated on this form. 積金局或受託人在接受此表格上之修改前或需僱主提供附加資料（包括但並不限於「成員同意書」）。

Effective Date of Change 生效日期 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (dd 日/mm 月/yyyy 年)

(i) Category of Employee 僱員類別

- Add 新增 / Delete 取消# \_\_\_\_\_
- Add 新增 / Delete 取消# \_\_\_\_\_

# Please delete whichever is inappropriate. In case of adding new Category of Employee, please complete "Voluntary Contributions Commencement Date", "Voluntary Contributions Definition" and "Benefit Vesting Scale on Employer's Voluntary Contributions". 請刪除不適用者。如新增僱員類別，請填妥「自願性供款開始日期」、「自願性供款細則」及「僱主自願性供款的權益歸屬比例」。

(ii) Voluntary Contributions Commencement Date 自願性供款開始日期

(The change will be applied to all new members who are employed on or after the Final Effective Date of Change 此修改將適用於最終的生效日期或之後受僱的成員)

- Contributions start from beginning of employment 供款由受僱日期開始
- Contributions start after \_\_\_\_\_ months/days\* from beginning of employment 供款由受僱日期的 \_\_\_\_\_ 個月/日\*開始

(iii) Voluntary Contributions Definition 自願性供款細則

Option 1: Regular contributions based on a specific percentage ("%") of employee's income. Please elect only ONE Plan as below

方案一： 每期供款以僱員收入的一個特定百分比（“%”）計算。請選擇以下一個計劃

- Plan 1 (Total Relevant Income – Maximum Level of Relevant Income) x %  
計劃一 (有關入息總額 – 最高有關入息水平) x %
- Plan 2 (Basic Salary – Maximum Level of Relevant Income) x %  
計劃二 (基本薪金 – 最高有關入息水平) x %
- Plan 3 Total Relevant Income x %  
計劃三 有關入息總額 x %
- Plan 4 Basic Salary x %  
計劃四 基本薪金 x %
- Plan 5 (Basic Salary x %) – Mandatory Contribution of that payroll period  
計劃五 (基本薪金 x %) – 該支薪週期的強制性供款
- Plan 6 (Total Relevant Income x %) – Mandatory Contribution of that payroll period  
計劃六 (有關入息總額 x %) – 該支薪週期的強制性供款

Please specify the rate of Voluntary Contributions:

請註明白願性供款率：

Category of Employee 僱員類別	Employer Contribution % 僱主供款百分率	Employee Contribution % 僱員供款百分率

\* Please delete whichever is inappropriate

\* 請刪除不適用者



- Option 2:** Regular contributions based on a fixed amount  
**方案二:** 每期供款以固定金額計算

Please specify the rate of Voluntary Contributions:  
 請註明自願性供款率:

Category of Employee 僱員類別	Employer Contribution Amount (HK\$) 僱主供款金額 (港元)	Employee Contribution Amount (HK\$) 僱員供款金額 (港元)

- (iv) **Benefit Vesting Scale on Employer's Voluntary Contributions** 僱主自願性供款的權益歸屬比例

Employee will be entitled to Employer's Voluntary Contributions according to the following scale when he/she ceases employment with Employer.  
 Please complete the table below.

當僱員離職時，僱員可根據以下的權益歸屬表獲取僱主自願性供款。請填寫下列權益歸屬表。

■ **Vesting Benefits** 權益歸屬

- From commencement date of employment; or  
 由受僱日期開始; 或  
 From commencement date of joining scheme  
 由參加計劃日期開始

■ **Benefit Vesting Scale** 權益歸屬比例

Completed Years of Service 已滿的服務年數	Vesting Percentage 歸屬百分比			
	<input type="checkbox"/> Option 1 Immediate and full vesting 方案一 利益即時及全數歸屬僱員	<input type="checkbox"/> Option 2 方案二	<input type="checkbox"/> Option 3 方案三	<input type="checkbox"/> Option 4 <sup>+</sup> 方案四 <sup>+</sup>
	Category of Employee 僱員類別			
	_____	_____	_____	_____
Less than 1 少於一年	100%	0%	0%	
1	100%	10%	0%	
2	100%	20%	0%	
3	100%	30%	30%	
4	100%	40%	40%	
5	100%	50%	50%	
6	100%	60%	60%	
7	100%	70%	70%	
8	100%	80%	80%	
9	100%	90%	90%	
10 or more 10年或以上	100%	100%	100%	

<sup>+</sup> Please attach your own vesting scale if necessary 如有需要，請另附歸屬表

- (v) **Payroll Frequency** 發薪週期

(The change will be applied to all members, otherwise, please specify affected Category of Employee or names of the affected Employee. 此修改將適用於所有成員，否則請列明受影響之僱員類別或受影響之僱員姓名：\_\_\_\_\_.)

(The Payroll Frequency will be applied to both Voluntary Contributions and Mandatory Contributions. 發放薪金形式將適用於自願性供款及強制性供款。)

Payroll Frequency 發薪週期	Contribution Period 供款期
<input type="checkbox"/> Monthly 每月一次	: From _____ To _____ 由 Day 日 至 Day 日
<input type="checkbox"/> Twice a Month 每月兩次	: From _____ To _____ and _____ To _____ 由 Day 日 至 Day 日 及 Day 日 至 Day 日
<input type="checkbox"/> Weekly 每週一次	: From _____ To _____ 由 Weekday 星期 至 Weekday 星期
<input type="checkbox"/> Others 其他	: Please specify (e.g. quarterly, yearly) 請列明 (例如: 每季或每年) _____

(vi) Benefit Entitlement 權益的享有

An employee or his / her personal representative will be entitled to 100% of the Employer's Voluntary Contributions upon the following situation(s) (you may choose more than 1 item)  
在發生以下情況時，僱員或其遺產代理人將有權獲得僱主自願性供款的100%  
(閣下可選擇一項或以上)

The employee attaining the normal retirement age<sup>△</sup> of \_\_\_\_\_ / The death of the employee during the employment with his Employer / The employee leaving service of the Employer due to total incapacity  
僱員已屆正常退休年齡<sup>△</sup> \_\_\_\_\_ 歲 / 在受僱期間死亡 / 由於完全喪失行為能力而離職

The employee attaining the early retirement age<sup>△</sup> of \_\_\_\_\_  
僱員已屆提早退休年齡<sup>△</sup> \_\_\_\_\_ 歲

<sup>△</sup> Please provide details if there are different normal / early retirement ages for different categories of Employee.  
如不同僱員類別設有不同正常退休 / 提早退休年齡，請提供詳情。

(vii) Forfeited Benefit 歸屬僱主權益

Please select the treatment of forfeited benefit:  
請選擇歸還僱主權益之處理方法：

Offset Employer's Future Mandatory Contributions and Voluntary Contributions  
抵銷僱主未來的強制性供款及自願性供款

Refund to the Employer  
退回僱主

(viii) Cessation of Voluntary Contributions 停止自願性供款

(The change will be applied to all members, otherwise, please specify affected Category of Employees or names of the affected Employee. 此修改將適用於所有成員，否則請列明受影響之僱員類別或受影響之僱員姓名：\_\_\_\_\_)

**Additional Information (if any) 額外資料 (如有)**

**Declaration 聲明**

We, the Employer, hereby confirm that all the information given above and the attached document(s) (if any) are complete, true and accurate, and is given to the best of our knowledge. We understand that the Mandatory Provident Fund Schemes Authority (the "MPFA") or the Trustee may require additional information, including but not limited to 'Consent by Members' before accepting the changes stated on this form; and should the change be subject to the approval of the MPFA, the final effective date of change will be the later of the final effective date of change as approved by the MPFA or the "Effective Date of Change" stated on this form.

本公司 (僱主) 謹此確定上述資料及附上之文件 (如有) 均是完整、真實及準確，並且是盡本公司所知而作答。本公司明白強制性公積金計劃管理局 ("積金局") 或受託人在接受此表格上之修改前或需本公司提供附加資料 (包括但並不限於「成員同意書」)，另如有關修改需經由積金局批核，最終的生效日期將以積金局批准的生效日期或在表格內所列的生效日期兩者中較後者為準。

For and on behalf of the Employer 謹代表僱主  
Authorised Signature(s) with Company Chop 授權人簽署及公司印章

Date 日期(dd 日/mm 月/yyyy)

For office use only:  
Processed by: \_\_\_\_\_

Date: \_\_\_\_\_

Checked by: \_\_\_\_\_

Date: \_\_\_\_\_

**Sun Life Pension Trust Limited 永明退休金信託有限公司**

**Please send the completed form to: Sun Life MPF Basic / Comprehensive Scheme, the Administrator, BestServe Financial Limited**

10/F, One Harbourfront, 18 Tak Fung Street, Hung Hom, Kowloon, Hong Kong Tel 3183 1900 Fax 3183 1901

請將填妥表格交予: 永明強積金基本/綜合計劃行政管理人-卓譽金融服務有限公司

香港九龍紅磡德輔街 18 號海濱廣場一座十樓 電話 3183 1900 傳真 3183 1901