

(Macau CPF)

## DIRECT DEBIT AUTHORISATION 直接付款授權書

Please complete and return this form to the party to be credited. 請填妥此授權書並交予收款之一方。

Name of party to be credited (The Beneficiary) 收款之一方(受益人)		Α	١cc	our	ıt No	o. to	be o	crec	liteo	l 收	〔款	賬戶	之				A/C Currency 賬戶幣值
MassMutual Asia Ltd.	1	0		0	1	5		1	0		0	0	0	)	6	6	MOP 澳門幣
I/We hereby authorize my/our below named Bank to effect transfers from my/out to that of the above named beneficiary in accordance with such instructions Bank may receive from the beneficiary from time to time.																	受益人不時給予本人/吾等 :受益人。
$I/We agree that \ my/ \ our \ Bank \ shall \ not \ be \ obliged \ to \ ascertain \ whether \ or \ not \ not \ such \ transfer \ has \ been \ given \ to \ me/ \ us.$	otice o	f any	,		·人/ ·等。	吾等	同点	意本	人/	/吾	等之	之銀行	<b>亍毋</b> :	須該	資富	亥等輔	· 賬通知是否已交予本人/
I/We jointly and severally accept full responsibility for any overdraft (or existing overdraft) on my/our account which may arise as a result of any such transfer.			ı									等之! 詹全音				支 ( 3	<b>戈令現時之透支増加),本</b>

I/We agree that should there be insufficient funds in my/our Bank account to meet any transfer hereby authorized, my/our Bank shall be entitled, in its discretion, not to effect such transfer in which event the Bank may make the usual charge and that it may cancel this authorization at any time on one week's written notice.

This authorization shall have effect until further notice.

I/We agree that any notice of cancellation or variation of this authorization which I/we may give to my/our Bank shall be given at least one week prior to the date on which such cancellation / variation is to take effect.

I/We understand that all payments under this authorization are the contributions payment due under my/our provident fund schemes with the above named beneficiary as specified 本人/吾等同意如本人/吾等之賬戶並無足夠款項支付該等授權轉賬,本人 /吾等之銀行有權不予轉賬,銀行可收取慣常之收費,並可隨時以一星期書 面通知取消本授權書

本授權書將繼續生效直至另行通知為止。

本人/吾等同意,本人/吾等取消或更改本授權書之任何通知,須於取消/更 改生效日最少一星期之前交予本人/吾等之銀行。

本人/吾等明白所有根據本授權書之付款均為支付在債務人參考欄內列明由 上述受益人發與本人/吾等之公積金供款。

Bank Name 銀行名稱	A/C (	Currency 賬戶幣值	My/Our Account	No. 本人/吾等之賬戶號碼							
LUSO INTERNATIONAL BANKING LIMITED 澳門國際銀行		MOP 澳門幣									
My/Our Name as recorded on Statement/Passbook (Please complete in English) 本人/吾等在結單/存摺上所紀錄之名稱(請以英文填寫)			recorded on Statement/ 人存摺上所紀錄之地址								
My/Our Signature(s) 本人/吾等之簽名 (Signature(s) must agree with your Bank's Record) (簽名須與銀行賬戶檔案完全相同)		My/Our Macau ID Ca 本人/吾等之澳門身化	•	Sign Date 簽署日期: (MM/DD/YY)(月/日/年)							
Debtor's Reference - Scheme No.			Name of Account Owner								
債權人參考 - 計劃編號 			帳戶擁有人	<b>石</b> 稱							

All the above items must be completed and information provided must correspond with the Bank's record. 以上所有項目必須填寫及所提供的資料必須與銀行紀錄相同。