

MANDATORY PROVIDENT FUND SCHEMES AUTHORITY

IV.14 Guidelines on Remittance Statement

INTRODUCTION

Section 123 of the Mandatory Provident Fund Schemes (General) Regulation (“the Regulation”) requires a participating employer to ensure, when paying contributions to the approved trustee of a registered scheme, that the contributions are accompanied by a remittance statement, in a form specified or approved by the Mandatory Provident Fund Schemes Authority (“the Authority”), for the contribution period to which the contributions relate.

2. Section 47A of the Mandatory Provident Fund Schemes Ordinance (“the Ordinance”) empowers the Authority to specify or approve the form and contents of documents required for the purposes of the Ordinance.

3. Section 6H of the Ordinance provides that the Authority may issue guidelines for the guidance of approved trustees, service providers and other persons concerned with the Ordinance.

4. The Authority hereby issues guidelines to prescribe the format of the remittance statement to be used by participating employers.

REMITTANCE STATEMENT

5. The content and the format of the remittance statement are set out in Annex A. An example and a sample of a remittance statement are also shown at Annex B for reference. The information provided in the remittance statement should be provided in respect of each contribution period of each

relevant employee.

6. Contributions for employees having different contribution periods should be reported in separate remittance statements. For example, an employer should report contributions for his weekly paid and monthly paid employees in two separate remittance statements.

7. Section 47A of the Ordinance provides that if the Authority has specified or approved a form for the purposes of the Ordinance, strict compliance with the form is not necessary and substantial compliance is sufficient. Accordingly, a service provider may design its own format provided that the format must include all information as required by section 123(2) of the Regulation and provide a designated area for the signature of the employer or the authorized person(s) of the employer. Any such format of remittance statement which complies substantially with the form set out in Annex A will be deemed to have been approved by the Authority.

EMPLOYER'S SIGNATURE REQUIREMENT FOR SUBMISSION OF REMITTANCE STATEMENT TO THE TRUSTEE

8. An employer is required to confirm the accuracy and completeness of the information in a remittance statement by signing in such area(s) as designated in the prescribed remittance statement or by submitting the remittance statement in such manner as the approved trustee may reasonably require. If an employer is not an individual, the remittance statement has to be signed by a duly authorized signatory.

9. A remittance statement is not properly completed for the purpose of section 47A of the Ordinance if it is not completed in accordance with paragraph 8. In the circumstances, trustees may refuse to process the contribution(s) concerned.

DEFINITION OF TERMS

10. Where a term used in the Guidelines is defined in the Ordinance or the subsidiary legislation then, except where specified in the Guidelines, that term carries the meaning as defined in the Ordinance or the subsidiary legislation.

Name of Scheme :
Scheme Registration No. :

MANDATORY PROVIDENT FUND SCHEMES ORDINANCE (CAP. 485)
REMITTANCE STATEMENT

Name of Employer :
Name of Contact Person :
Address :
Telephone No. :
Employer Participation No. :

Contributions for the contribution period from _____ to _____

Part I - For New Employees (Note 1)

No.	Name of Employee (Surname first)	HKID Card No. or Scheme Membership No.	Relevant Contribution Period		Relevant Income (\$)	Employer's Contributions		Employee's Contributions		Total (\$)		Date of Employment (DD / MM / YY)	
			For Employer's Contributions	For Employee's Contributions *		(a)	(b)	(c)	(d)	(a) + (c)	(b) + (d)		
						Mandatory Contributions (\$)	Voluntary Contributions (\$)	Mandatory Contributions (\$)	Voluntary Contributions (\$)	Mandatory Contributions (\$)	Voluntary Contributions (\$)		
1			To	To									
			To	To									
			To	To									
Sub-total :													
						Contribution surcharge (\$), if applicable:					-		
						Sub-total :						(i)	

* After taking into account the first 30-day-contribution holiday and:

- (i) waiver of contributions for the first incomplete payroll period for employees with monthly or more frequent than monthly payroll; or
- (ii) waiver of contributions for the incomplete calendar month immediately following the contribution holiday for employees with less frequent than monthly payroll

Part II - For Existing Employees (Note 2)

No.	Name of Employee (Surname first)	HKID Card No. or Scheme Membership No.	Relevant Income (\$)	Employer's Contributions		Employee's Contributions		Total (\$)		Date of Cessation of Employment, (if applicable) (Note 3) (DD / MM / YY)
				(a)	(b)	(c)	(d)	(a) + (c)	(b) + (d)	
				Mandatory Contributions (\$)	Voluntary Contributions (\$)	Mandatory Contributions (\$)	Voluntary Contributions (\$)	Mandatory Contributions (\$)	Voluntary Contributions (\$)	
1										
2										
Sub-total :										
								Contribution surcharge (\$), if applicable:		
								Sub-total :		-
								TOTAL:		(ii)
										(i) + (ii)

Date : _____

(Signature of the employer)

Note 1: If the employer is not an individual, this statement must be signed by a duly authorised signatory.

Note 2: In the absence of the employer's signature, this remittance statement would be regarded as incomplete.

Notes :

- (1) Employers should state clearly in this remittance statement for each new employee:
 - (a) the relevant income for each of the relevant contribution periods included in this statement; and
 - (b) the respective employer's and employee's contributions for each of these periods, so as to enable the scheme trustee to check the arithmetic accuracy of the contributions.
- (2) Employees who do not have any relevant income (such as those on no-paid leave) should also be reported in this part.
- (3) Employers should notify trustee if the cessation of employment of employees was due to intra-group transfer.

Example

ABC Company is a new company and employs two new employees (who are not casual employees) during January 20XX. Employment information of the two employees is as follows:

	<u>Employee A</u>	<u>Employee B</u>
Date of Commencing Employment:	1 January 20XX	5 January 20XX
Name of Scheme joined:	MT Scheme	MT Scheme
Contribution Period:		
For employer:	On calendar month basis	On calendar month basis
For employee:	On calendar month basis excluding the first 30 days and the first incomplete payroll period	On calendar month basis excluding the first 30 days and the first incomplete payroll period
Contribution Period in which the Permitted Period ends:	March 20XX	March 20XX
Voluntary Contribution:	Nil	Nil

Relevant Income for Mandatory Contribution Purposes:

January	HK\$20,000	HK\$10,000
February	HK\$20,000	HK\$12,000
March	HK\$20,000	HK\$12,000

Sample of the Remittance Statement to be submitted to the trustee of MT Scheme by ABC Company is as follows:

Name of Scheme : MT Scheme
Scheme Registration No. : MT12345

MANDATORY PROVIDENT FUND SCHEMES ORDINANCE (CAP. 485)
REMITTANCE STATEMENT

Name of Employer : ABC Company
Name of Contact Person : Mr XYZ
Address : Room 1A, 1 Happy Street, Hong Kong
Telephone No. : 21234567
Employer Participation No. : BR123456780001

Contributions for the contribution period from 1 March 20XX to 31 March 20XX

Part I - For New Employees (Note 1)

No.	Name of Employee (Surname first)	HKID Card No. or Scheme Membership No.	Relevant Contribution Period		Relevant Income (\$)	Employer's Contributions		Employee's Contributions		Total (\$)		Date of Employment (DD / MM / YY)
			For Employer's Contributions	For Employee's Contributions		(a)	(b)	(c)	(d)	(a) + (c)	(b) + (d)	
						Mandatory Contributions (\$)	Voluntary Contributions (\$)	Mandatory Contributions (\$)	Voluntary Contributions (\$)	Mandatory Contributions (\$)	Voluntary Contributions (\$)	
1	Employee A	A123456(1)	01/01/XX To 31/01/XX	-	20,000.00	1,000.00	-	-	-	1,000.00	-	1/1/XX
			01/02/XX To 28/02/XX	01/02/XX To 28/02/XX	20,000.00	1,000.00	-	1,000.00	-	2,000.00	-	
			01/03/XX To 31/03/XX	01/03/XX To 31/03/XX	20,000.00	1,000.00	-	1,000.00	-	2,000.00	-	
2	Employee B	B123456(1)	05/01/XX To 31/01/XX	-	10,000.00	500.00	-	-	-	500.00	-	5/1/XX
			01/02/XX To 28/02/XX	-	12,000.00	600.00	-	-	-	600.00	-	
			01/03/XX To 31/03/XX	01/03/XX To 31/03/XX	12,000.00	600.00	-	600.00	-	1,200.00	-	
Sub-total :						4,700.00	-	2,600.00	-	7,300.00	-	
						Contribution surcharge (\$), if applicable:				-	-	
						Sub-total :				7,300.00	-	(i)

Part II - For Existing Employees – (Note 2)

No.	Name of Employee (Surname first)	HKID Card No. or Scheme Membership No.	Relevant Income (\$)	Employer's Contributions		Employee's Contributions		Total (\$)		Date of Cessation of Employment, (if applicable) (Note 3) (DD / MM / YY)
				(a)	(b)	(c)	(d)	(a) + (c)	(b) + (d)	
				Mandatory Contributions (\$)	Voluntary Contributions (\$)	Mandatory Contributions (\$)	Voluntary Contributions (\$)	Mandatory Contributions (\$)	Voluntary Contributions (\$)	
	N/A	N/A	-	-	-	-	-	-	-	
Sub-total :				-	-	-	-	-	-	
Contribution surcharge (\$), if applicable:								-	-	
Sub-total :								-	-	(ii)
TOTAL:								7,300.00	-	(i) + (ii)

Date : 1 April 20XXMr. CHAN Tai Man

(Signature of the employer)

Note 1: If the employer is not an individual, this statement must be signed by a duly authorised signatory.**Note 2: In the absence of the employer's signature, this remittance statement would be regarded as incomplete.**Notes :

- (1) Employers should state clearly in this remittance statement for each new employee:
 - (a) the relevant income for each of the relevant contribution periods included in this statement; and
 - (b) the respective employer's and employee's contributions for each of these periods, so as to enable the scheme trustee to check the arithmetic accuracy of the contributions.
- (2) Employees who do not have any relevant income (such as those on no-paid leave) should also be reported in this part.
- (3) Employers should notify trustee if the cessation of employment of employees was due to intra-group transfer.