

You should only deal with a Marketing Representative ("MR") registered with Berjaya Mutual Berhad (*Formerly known as Inter-Pacific Asset Management Sdn Bhd*). The list of registered MRs with Berjaya Mutual can be found in our website at <a href="https://www.berjayamutual.com/">https://www.berjayamutual.com/</a>. If in doubt, please contact our Customer Service department at 03-2117 1889 or email us at <a href="mailto:enquiry\_ipam@interpac.com.my">enquiry\_ipam@interpac.com.my</a>.



## Berjaya Mutual Berhad

(Formerly known as Inter-Pacific Asset Management Sdn Bhd) (Berjaya Mutual) Registration No. 199001013139 (204709-U)

BERJAYA West Wing, Level 13, Berjaya Times Square No. 1, Jalan Imbi, 55100 Kuala LumpurTel: 03-BERJAYA MUTUAL 2117 1889 Fax: 03-2142 6029

PRIVATE MANDATE TRANSACTION FORM (INJECTION)

Please complete this form in BLOCK  Individual  Jo	Related Party Staff									
1. PARTICULARS OF FIRST 1	INDIVIDUAL APPLICANT									
Full Name (as per MyKad / Passp										
		5	••••••							
MyKad No. : Passport No.:										
Sole Proprietor / Sole Trader										
Name (as in Certificate of Incorpo	oration)									
Company Registration No.:										
2. PARTICULARS OF JOINT APPLICANT / DESIGNATED SECOND ACCOUNT HOLDER										
Full Name (as per MyKad / Passport / Birth Certificate)										
MyKad No. : Passport / Birth Certificate No.:										
3. PARTICULARS OF CORPORATE APPLICANT										
Name (as in Certificate of Incorporation)										
Company Registration No.:  Date of Incorporation:										
Company Registration No.:  Contact Person:  Date of Incorporation  Designation  Designation										
4. INJECTION DETAILS										
Client Code	Initial Investment	Top-Up Investment	Currency	Investment Amount						
Note: 1) Investment amount should be remitted to the aforementioned Manager's account in Ringgit Malaysia (RM).  2) All inward bank service charges including outstation cheque commissions and telegraphic transfer charges are to be borne by the investor.  3) The Manager will process all investments upon receipt of cleared payment and the completed documents.										
5. PAYMENT MODE FOR INJ	ECTION									
Telegraphic Transfer Cheque / Bank Draft (Bank): Cheque No:										
Cash Deposit Machine (please attached cash deposit slip together with this Transaction Form)										



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Biller Code: 216622 Ref-1: Client Code Ref-2: MyKad / Passport

JomPAY online at Internet and Mobile Banking with your

			Current or Savings a	ccount	
6. BANK ACCOUNT PARTICULARS					
Bank Name					
Account Name					
Account Number					
Account Type	Savings	Current			
Account Ownership	Single	Joint			
7. INJECTION PAYMENT INSTRUCTION	N (FOR JOINT HOLDERS AC	COUNT ONLY)			
Payment from : First Account Hole			th Account Holder		
8. PARTICULARS OF INTRODUCER					
Full Name (as per MyKad / Passport)					
	••••••		•••••••	••••••	••••••
MyKad No. :		Phone No. :			
E-mail :					
			MR Code :		
9. SIGNATURE OF CLIENT					
1) I/We declare that the above information is 2) I/We undertake to furnish Berjaya Mutual 3) I am / We are aware of the fees and charges	with such additional particulars an	nd information as Berjaya M	Iutual may require at		
				Company	
Signature of First Applicant / Authorised Signatory (Corporate Applicant)	Signature of Second	Applicant / y (Corporate Applicant)	(	Stamp	
Date:	Date:				
For Distributor / Intro	ducer Use Only		For Office U	se Only	
IUTA	C/MR				
Name : Name	:	Date & Time Received :		Transaction Date	:
Branch : Code	:	Input By :		Client Code	:
Sales Charge : Sales	Charge :	Checked By :			
Rubber Stamp : Signat	ure :	Approved By :			
Date : Date	:				