



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 <https://www.berjyamutual.com/>. If in doubt, please contact our Customer Service department at 03-2117 1889 or email us at enquiry_ipam@interpac.com.my.



Berjaya Mutual Berhad
 (Formerly known as Inter-Pacific Asset Management Sdn Bhd) (Berjaya Mutual)
 Registration No. 199001013139 (204709-U)
 West Wing, Level 13, Berjaya Times Square No. 1, Jalan Imbi, 55100 Kuala Lumpur
 Tel: 03-2117 1889 Fax: 03-2142 6029

**PRIVATE MANDATE
 TRANSACTION FORM
 (INJECTION)**

Please complete this form in BLOCK LETTERS and tick (✓) where appropriate.

Individual Joint Corporate

Related Party Staff

PARTICULARS OF FIRST INDIVIDUAL APPLICANT

Full Name (as per MyKad / Passport)

.....

MyKad No. :

Passport No.:

Sole Proprietor / Sole Trader

Name (as in Certificate of Incorporation)

.....

Company Registration No.:

PARTICULARS OF JOINT APPLICANT / DESIGNATED SECOND ACCOUNT HOLDER

Full Name (as per MyKad / Passport / Birth Certificate)

.....

MyKad No. :

Passport / Birth Certificate No.:

PARTICULARS OF CORPORATE APPLICANT

Name (as in Certificate of Incorporation)

.....

Company Registration No.:

Date of Incorporation :

Contact Person :

Designation :

INJECTION DETAILS

Client Code	Initial Investment	Top-Up Investment	Currency	Investment Amount
	<input type="checkbox"/>	<input type="checkbox"/>		

- Note: 1) Investment amount should be remitted to the aforementioned Manager’s account in Ringgit Malaysia.
 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.

PAYMENT MODE FOR INJECTION

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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**PRIVATE MANDATE
 TRANSACTION FORM
 (INJECTION)**



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

JomPAY online at Internet and Mobile Banking with your Current or Savings account

BANK ACCOUNT PARTICULARS

Bank Name	
Account Name	
Account Number	
Account Type	<input type="checkbox"/> Savings <input type="checkbox"/> Current
Account Ownership	<input type="checkbox"/> Single <input type="checkbox"/> Joint

INJECTION PAYMENT INSTRUCTION (FOR JOINT HOLDERS ACCOUNT ONLY)

Payment from : First Account Holder Only Either One Account Holder Both Account Holder

PARTICULARS OF INTRODUCER

Full Name (as per MyKad / Passport)

.....

MyKad No. : - - Phone No. :

E-mail :

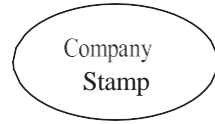
MR Code :

SIGNATURE OF CLIENT

- 1) I / We declare that the above information is complete and true and that I / we have not withheld any material facts or information from Berjaya Mutual.
- 2) I / We undertake to furnish Berjaya Mutual with such additional particulars and information as Berjaya Mutual may require at any time and from time to time.
- 3) I am / We are aware of the fees and charges that I / We will incur directly or indirectly when investing in the portfolio.

.....
 Signature of First Applicant /
 Authorised Signatory (Corporate Applicant)

.....
 Signature of Second Applicant /
 Authorised Signatory (Corporate Applicant)



Date:

Date:

For Distributor / Introducer Use Only		For Office Use Only	
<i>IUTA</i>	<i>UTC / MR</i>		
Name :	Name :	Date & Time Received :	Transaction Date :
Branch :	Code :	Input By :	Client Code :
Sales Charge :	Sales Charge :	Checked By :	
Rubber Stamp :	Signature :	Approved By :	
Date :	Date :		