



PERBADANAN TABUNG PENDIDIKAN TINGGI NASIONAL
SKIM SIMPANAN PENDIDIKAN NASIONAL
(BERLANDASKAN 'WAKALAH BIL ISTITHMAR')
JAMINAN KECEMERLANGAN PENDIDIKAN

☐ 06- PEMBUKAAN AKAUN BAHARU
OPENING OF AN ACCOUNT

☒ 02- PENAMBAHAN DEPOSIT
SUBSEQUENT DEPOSIT

PTPTN-S-01/10-2007 Pin 1.



Maybank

No : M 2694329

SILA GUNAKAN SLIP BERASINGAN BAGI SETIAP KATEGORI DEPOSIT DAN TANDA SATU PETAK SAHAJA. PLEASE USE SEPARATE SLIP FOR EACH CATEGORY OF DEPOSIT AND TICK ONE BOX.

☐ WANG TUNAI CASH	RINGGIT MALAYSIA	RM 6000		SEN 00
☐ CEK CAWANGAN HOUSE CHEQUE	NO. CEK CHEQUE NO.	RM		SEN
DEBIT AKAUN A/C TO BE DEBITED	TANDATANGAN / SIGNATURE			
NAMA PENDEPOSIT: DEPOSITOR'S NAME	NO. MYKAD PENDEPOSIT: DEPOSITOR'S MYKAD NO.		RM	
FOO CHEE YONG		750701715053		SEN

SSPN Subsequent Deposit Payment 564324340817

400000

27/10/2016

D130100850FE01 00083244

SSPN PAYMENT

SSPN ACCT NO.:

027507017150539

Bank Reference No.: ARE51146848A

Payment Mode:

Cash

EJ

00083244163 018611

NAMA PENERIMA MANFAAT:
BENEFICIARY'S NAME: FOO CHEE YONG

ALAMAT:

ADDRESS:

NO. AKAUN SSPN-i (LIHAT PANDUAN BELAKANG)
SSPN-i A/C NO. (REFER BACK PAGE)

007507017150539

TEL:

012-2819894

TELLER

PEGAWAI

Salinan Pendeposit

THE SCHEDULE

TYPE OF PLAN: **PARTICIPATING POLICY WITH SURRENDER VALUE**

GREAT EDUPLANNER
(EDUCATION POLICY)

BASIC SUM ASSURED
RM30,000

CURRENCY
MALAYSIAN RINGGIT

AGE NEXT BIRTHDAY
LIFE ASSURED : 2 ADMITTED
POLICYOWNER : 35 ADMITTED

DATE OF COMMENCEMENT
29/10/2009

BASIC PREMIUM

RM2,013.00 PAYABLE YEARLY FROM THE DATE OF COMMENCEMENT FOR 15 YEAR(S) INCLUSIVE OF THE LAST PREMIUM DUE ON 29/10/2023 OR UNTIL THE DEATH OF THE LIFE ASSURED, IF EARLIER.

DATE OF ISSUE OF POLICY
31/10/2009

RISK COMMENCEMENT DATE
29/10/2009

OFFICE OF CO. FOR PAYMENT OF PREMIUMS AND BENEFITS
MALAYSIA

EVENT WHEN BASIC SUM ASSURED WILL BECOME PAYABLE/MATURITY OR EXPIRY DATE

UPON THE SURVIVAL OF THE LIFE ASSURED TO THE MATURITY DATE OF 29/10/2029 OR UPON THE DEATH OF THE LIFE ASSURED, WHICHEVER OCCURS FIRST.

POLICY NO: 100510487-9
POLICYOWNER :
MR FOO CHEE YONG

PROPOSAL NO: MAC/08312/09

750701-71-5053

LIFE ASSURED :
MR FOO KAI HAO

080926-16-0159

POLICYOWNER'S : 21
ADDRESS 10/2J PUTRA HEIGHTS

JLN PUTRA PERMAI
47650 SUBANG JAYA, SELANGOR

TABLE OF SUPPLEMENTARY BENEFITS

SUPPLEMENTARY BENEFITS	LAST PREMIUM DUE DATE	EXPIRY DATE	AMOUNT OF BENEFITS	YEARLY PREMIUM	ANNEXURE
*PBR-PLUS	29/10/2023	29/10/2024	PW RM2013.00/YR	RM104.50**	W21
* DENOTES MEDICAL BENEFIT INSURANCE			** PREMIUM SUBJECT TO REVISION (SEE ANNEXURE)		
PW=PREMIUM WAIVER					

SPECIAL PROVISIONS / ENDORSEMENTS

240(VEST) 278(DDDEFN) 296(CTPD) 299(CHD)



Allianz Life Insurance Malaysia Berhad (104248-X)

POLICY SCHEDULE

STAMP DUTY PAID

POLICY OWNER FOO CHEE YONG		POLICY NO. 6000849985		ISSUE DATE 31/01/2015	
NRIC NO. 750701-71-5053		BASIC PLAN PowerLink		POLICY DATE 28/01/2015	
TYPE OF POLICY NON PARTICIPATING		INSURED AMOUNT RM 90,000.00			

ASSURED	NAME	NRIC NO.	AGE	SEX	ADMITTED	RELATIONSHIP TO POLICY OWNER
LIFE ASSURED	YEAP YANN HONG	800926-08-6326	34	Female	No	Wife
	FOO CHEE YONG	750701-71-5053	40	Male	No	
JOINT LIFE ASSURED	NOT APPLICABLE					
SPOUSE	NOT APPLICABLE					
DEPENDENT	NOT APPLICABLE					

SCHEDULE OF BENEFITS AND PREMIUMS						SCHEDULE OF POLICY VALUES PER RM1000 INSURED AMOUNT		
TYPE OF COVERAGE	AMOUNT OF BENEFITS* (RM)	MODAL PREMIUM (RM)	LAST PAYMENT DATE	PREMIUM PAYABLE TERM (Year)	MATURITY/EXPIRY DATE	END OF POLICY YEAR	CASH VALUE	PAID-UP VALUE
PowerLink	90,000.00	290.00	28/12/2080	66	28/01/2081			
Insurance Premium		290.00						
Investment Premium		0.00						
Total and Permanent Disability	90,000.00	0.00	28/12/2045	31	28/01/2046			
Enhanced MediCover	200.00	0.00	28/12/2071	57	28/01/2072			
MCO Fees	0.00	0.00	28/12/2071	57	28/01/2072			
PACover	10,000.00	0.00	28/12/2050	36	28/01/2051			
PayorCover	3,480.00	0.00	28/12/2080	66	28/01/2081			
PayorCover (ETPD)	3,480.00	0.00	28/12/2080	66	28/01/2081			
Prime Care	40,000.00	0.00	28/12/2080	66	28/01/2081			
Prime Care (Cancer Recovery Benefit)	14,000.00	0.00	28/12/2080	66	28/01/2081			
Prime Care (Diabetes Recovery Benefit)	8,000.00	0.00	28/12/2065	51	28/01/2066			
SecureCover	3,480.00	0.00	28/12/2074	60	28/01/2075			
SecureCover (ETPD)	3,480.00	0.00	28/12/2074	60	28/01/2075			
TOTAL MONTHLY PREMIUM (RM) 290.00								

PREMIUMS ARE PAYABLE ON THE POLICY DATE AND EVERY SUBSEQUENT 1 MONTH(S) THEREAFTER UNTIL THE LAST PAYMENT DATE AS PROVIDED ABOVE.

ANNEXURE ATTACHED - PLK_06V10 / UTPD_02V5 / EUMCR_02V1 / UPAR_01V7 / UPCR_03V5 / EUPCR_03V4 / UPRC200K_01V3 / UCRB200K_01V2 / UDRB200K_01V2 / USCRT_03V5 / EUSCRT_03V4

MAY DENOTE LIMITATIONS OF THE BENEFITS OR AMOUNT OF COVERAGE.

1 IF THE POLICY OWNER IS A CORPORATION / INSTITUTION, 6% SERVICE TAX WILL BE IMPOSED.

2 THE MAXIMUM TOTAL AND PERMANENT DISABILITY BENEFIT ON ANY ONE LIFE FROM ALL POLICIES WITH ALLIANZ LIFE INSURANCE MALAYSIA BERHAD SHALL NOT EXCEED RM2,000,000. HOWEVER, THIS IS SUBJECT TO ANY OTHER MAXIMUM LIMITS INDICATED IN THE RESPECTIVE POLICY PROVISION. PLEASE REFER TO THE POLICY CONTRACT.

3 AMOUNT OF BENEFITS FOR THE HOSPITALISATION AND SURGICAL RIDER REFERS TO THE ROOM AND BOARD BENEFIT WHICH REFLECTS THE CHOSEN PLAN TYPE. THE PLAN TYPE APPLICABLE TO ANY OPTIONAL BENEFIT SUPPLEMENT SHALL BE THE SAME PLAN TYPE AS THE ROOM AND BOARD BENEFIT CHOSEN FOR THE HOSPITALISATION AND SURGICAL INSURANCE SUPPLEMENTARY CONTRACT.

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Website : www.allianz.com.my

CHANNEL : AGI

Allianz Life Insurance Malaysia Berhad (104248-X)

POLICY SCHEDULE

STAMP DUTY PAID

POLICY OWNER	POLICY NO.	ISSUE DATE
FOO CHEE YONG	6000858631	10/02/2015
NRIC NO.	BASIC PLAN	POLICY DATE
750701-71-5053	PowerLink	10/02/2015
TYPE OF POLICY	INSURED AMOUNT	
NON PARTICIPATING	RM 70,000.00	

ASSURED	NAME	NRIC NO.	AGE	SEX	ADMITTED	RELATIONSHIP TO POLICY OWNER
LIFE ASSURED	FOO CHENG MING	100610-10-2505	5	Male	No	Son
	FOO CHEE YONG	750701-71-5053	40	Male	Yes	
JOINT LIFE ASSURED	NOT APPLICABLE					
SPOUSE	NOT APPLICABLE					
DEPENDENT	NOT APPLICABLE					

SCHEDULE OF BENEFITS AND PREMIUMS						SCHEDULE OF POLICY VALUES PER RM1000 INSURED AMOUNT		
TYPE OF COVERAGE	AMOUNT OF BENEFITS* (RM)	MODAL PREMIUM (RM)	LAST PAYMENT DATE	PREMIUM PAYABLE TERM (Year)	MATURITY/EXPIRY DATE	END OF POLICY YEAR	CASH VALUE	PAID-UP VALUE
PowerLink	70,000.00	180.00	10/01/2110	95	10/02/2110			
Insurance Premium		180.00						
Investment Premium		0.00						
Total and Permanent Disability	70,000.00	0.00	10/01/2075	60	10/02/2075			
Enhanced MediCover	150.00	0.00	10/01/2101	86	10/02/2101			
MCO Fees	0.00	0.00	10/01/2101	86	10/02/2101			
PACover	10,000.00	0.00	10/01/2080	65	10/02/2080			
Prime Care	30,000.00	0.00	10/01/2110	95	10/02/2110			
Prime Care (Cancer Recovery Benefit)	10,500.00	0.00	10/01/2110	95	10/02/2110			
Prime Care (Diabetes Recovery Benefit)	6,000.00	0.00	10/01/2095	80	10/02/2095			
SecureCover	2,160.00	0.00	10/01/2075	60	10/02/2075			
SecureCover (ETPD)	2,160.00	0.00	10/01/2075	60	10/02/2075			
TOTAL MONTHLY PREMIUM (RM) 180.00								

PREMIUMS ARE PAYABLE ON THE POLICY DATE AND EVERY SUBSEQUENT 1 MONTH(S) THEREAFTER UNTIL THE LAST PAYMENT DATE AS PROVIDED ABOVE.

ANNEXURE ATTACHED - PLK_06V10 / UTPD_02V5 / EUMCR_02V1 / UPAR_01V7 / UPRC200K_01V3 / UCRB200K_01V2 / UDRB200K_01V2 / USCRT_03V5 / EUSCRT_03V4

MAY DENOTE LIMITATIONS OF THE BENEFITS OR AMOUNT OF COVERAGE.

- IF THE POLICY OWNER IS A CORPORATION / INSTITUTION, 6% SERVICE TAX WILL BE IMPOSED.
- THE MAXIMUM TOTAL AND PERMANENT DISABILITY BENEFIT ON ANY ONE LIFE FROM ALL POLICIES WITH ALLIANZ LIFE INSURANCE MALAYSIA BERHAD SHALL NOT EXCEED RM2,000,000. HOWEVER, THIS IS SUBJECT TO ANY OTHER MAXIMUM LIMITS INDICATED IN THE RESPECTIVE POLICY PROVISION. PLEASE REFER TO THE POLICY CONTRACT.
- AMOUNT OF BENEFITS FOR THE HOSPITALISATION AND SURGICAL RIDER REFERS TO THE ROOM AND BOARD BENEFIT WHICH REFLECTS THE CHOSEN PLAN TYPE. THE PLAN TYPE APPLICABLE TO ANY OPTIONAL BENEFIT SUPPLEMENT SHALL BE THE SAME PLAN TYPE AS THE ROOM AND BOARD BENEFIT CHOSEN FOR THE HOSPITALISATION AND SURGICAL INSURANCE SUPPLEMENTARY CONTRACT.
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CHANNEL : AGI

Allianz Life Insurance Malaysia Berhad (104248-X)

POLICY SCHEDULE

STAMP DUTY PAID

POLICY OWNER		POLICY NO.		ISSUE DATE	
FOO CHEE YONG		6000857447		10/02/2015	
NRIC NO.		BASIC PLAN		POLICY DATE	
750701-71-5053		PowerLink		10/02/2015	
TYPE OF POLICY		INSURED AMOUNT			
NON PARTICIPATING		RM 70,000.00			

ASSURED	NAME	NRIC NO.	AGE	SEX	ADMITTED	RELATIONSHIP TO POLICY OWNER
LIFE ASSURED	FOO KAI HAO	080926-16-0159	6	Male	No	Son
	FOO CHEE YONG	750701-71-5053	40	Male	Yes	
JOINT LIFE ASSURED	NOT APPLICABLE					
SPOUSE	NOT APPLICABLE					
DEPENDENT	NOT APPLICABLE					

SCHEDULE OF BENEFITS AND PREMIUMS						SCHEDULE OF POLICY VALUES PER RM1000 INSURED AMOUNT		
TYPE OF COVERAGE	AMOUNT OF BENEFITS* (RM)	MODAL PREMIUM (RM)	LAST PAYMENT DATE	PREMIUM PAYABLE TERM (Year)	MATURITY/EXPIRY DATE	END OF POLICY YEAR	CASH VALUE	PAID-UP VALUE
PowerLink	70,000.00	180.00	10/01/2109	94	10/02/2109			
Insurance Premium		180.00						
Investment Premium		0.00						
Total and Permanent Disability	70,000.00	0.00	10/01/2074	59	10/02/2074			
Enhanced MediCover	150.00	0.00	10/01/2100	85	10/02/2100			
MCO Fees	0.00	0.00	10/01/2100	85	10/02/2100			
PACover	10,000.00	0.00	10/01/2079	64	10/02/2079			
Prime Care	30,000.00	0.00	10/01/2109	94	10/02/2109			
Prime Care (Cancer Recovery Benefit)	10,500.00	0.00	10/01/2109	94	10/02/2109			
Prime Care (Diabetes Recovery Benefit)	6,000.00	0.00	10/01/2094	79	10/02/2094			
SecureCover	2,160.00	0.00	10/01/2075	60	10/02/2075			
SecureCover (ETPD)	2,160.00	0.00	10/01/2075	60	10/02/2075			
TOTAL MONTHLY PREMIUM (RM) 180.00								

PREMIUMS ARE PAYABLE ON THE POLICY DATE AND EVERY SUBSEQUENT 1 MONTH(S) THEREAFTER UNTIL THE LAST PAYMENT DATE AS PROVIDED ABOVE.

ANNEXURE ATTACHED - PLK_06V10 / UTPD_02V5 / EUMCR_02V1 / UPAR_01V7 / UPRC200K_01V3 / UCRB200K_01V2 / UDRB200K_01V2 / USCRT_03V5 / EUSCRT_03V4

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CHANNEL : AGI

Allianz Life Insurance Malaysia Berhad (104248-X)

POLICY SCHEDULE

STAMP DUTY PAID

POLICY OWNER YEAP YANN HONG		POLICY NO. 6000849862		ISSUE DATE 05/02/2015	
NRIC NO. 800926-08-6326		BASIC PLAN PowerLink		POLICY DATE 05/02/2015	
TYPE OF POLICY NON PARTICIPATING		INSURED AMOUNT RM 70,000.00			

ASSURED	NAME	NRIC NO.	AGE	SEX	ADMITTED	RELATIONSHIP TO POLICY OWNER
LIFE ASSURED	FOO CHEE YONG	750701-71-5053	40	Male	No	Husband
	YEAP YANN HONG	800926-08-6326	34	Female	Yes	
JOINT LIFE ASSURED	NOT APPLICABLE					
SPOUSE	NOT APPLICABLE					
DEPENDENT	NOT APPLICABLE					

SCHEDULE OF BENEFITS AND PREMIUMS						SCHEDULE OF POLICY VALUES PER RM1000 INSURED AMOUNT		
TYPE OF COVERAGE	AMOUNT OF BENEFITS* (RM)	MODAL PREMIUM (RM)	LAST PAYMENT DATE	PREMIUM PAYABLE TERM (Year)	MATURITY/EXPIRY DATE	END OF POLICY YEAR	CASH VALUE	PAID-UP VALUE
PowerLink	70,000.00	430.00	05/01/2075	60	05/02/2075			
Insurance Premium		430.00						
Investment Premium		0.00						
Total and Permanent Disability	70,000.00	0.00	05/01/2040	25	05/02/2040			
Enhanced MediCover	250.00	0.00	05/01/2066	51	05/02/2066			
MCO Fees	0.00	0.00	05/01/2066	51	05/02/2066			
PACover	20,000.00	0.00	05/01/2045	30	05/02/2045			
PayorCover	5,160.00	0.00	05/01/2075	60	05/02/2075			
PayorCover (ETPD)	5,160.00	0.00	05/01/2075	60	05/02/2075			
Prime Care	150,000.00	0.00	05/01/2075	60	05/02/2075			
Prime Care (Cancer Recovery Benefit)	52,500.00	0.00	05/01/2075	60	05/02/2075			
Prime Care (Diabetes Recovery Benefit)	30,000.00	0.00	05/01/2060	45	05/02/2060			
SecureCover	5,160.00	0.00	05/01/2075	60	05/02/2075			
SecureCover (ETPD)	5,160.00	0.00	05/01/2075	60	05/02/2075			
TOTAL MONTHLY PREMIUM (RM) 430.00								

PREMIUMS ARE PAYABLE ON THE POLICY DATE AND EVERY SUBSEQUENT 1 MONTH(S) THEREAFTER UNTIL THE LAST PAYMENT DATE AS PROVIDED ABOVE.

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CHANNEL : AGI

Bill payment

Status:

Successful

Reference number:

3029416487

Transaction date:

06 Mar 2016 17:32:00

Amount:

RM65.00

From Account:

512482050967 M2U Premier

Corporation name :

Lembaga Hasil Dalam Negeri - (LHDN -
Semenanjung)

Payee Code :

7861

Tax Payer Name :

FOO CHEE YONG

Payment Code :

084-Bayaran Ansuran Cukai - Individu

Assessment Year :

2016

Installment Number :

6

Note: This receipt is computer generated and no signature is required.



Bill payment

Status:	Successful
Reference number:	3029414836
Transaction date:	06 Mar 2016 17:31:04
Amount:	RM61.00
From Account:	512482050967 M2U Premier
Corporation name :	Lembaga Hasil Dalam Negeri - (LHDN - Semenanjung)
Payee Code :	7861
Tax Payer Name :	FOO CHEE YONG
Payment Code :	084-Bayaran Ansuran Cukai - Individu
Assessment Year :	2016
Installment Number :	5

Note: **This receipt is computer generated and no signature is required.**



Bill payment

Status:

Successful

Reference number:

3029413332

Transaction date:

06 Mar 2016 17:30:11

Amount:

RM61.00

From Account:

512482050967 M2U Premier

Corporation name :

Lembaga Hasil Dalam Negeri - (LHDN -
Semenanjung)

Payee Code :

7861

Tax Payer Name :

FOO CHEE YONG

Payment Code :

084-Bayaran Ansuran Cukai - Individu

Assessment Year :

2016

Installment Number :

4

Note: This receipt is computer generated and no signature is required.



Bill payment

Status:	Successful
Reference number:	3029411796
Transaction date:	06 Mar 2016 17:29:15
Amount:	RM61.00
From Account:	512482050967 M2U Premier
Corporation name :	Lembaga Hasil Dalam Negeri - (LHDN - Semenanjung)
Payee Code :	7861
Tax Payer Name :	FOO CHEE YONG
Payment Code :	084-Bayaran Ansuran Cukai - Individu
Assessment Year :	2016
Installment Number :	3

Note: This receipt is computer generated and no signature is required.



Bill payment

Status:	Successful
Reference number:	3029410245
Transaction date:	06 Mar 2016 17:28:18
Amount:	RM61.00
From Account:	512482050967 M2U Premier
Corporation name :	Lembaga Hasil Dalam Negeri - (LHDN - Semenanjung)
Payee Code :	7861
Tax Payer Name :	FOO CHEE YONG
Payment Code :	084-Bayaran Ansuran Cukai - Individu
Assessment Year :	2016
Installment Number :	2

Note: This receipt is computer generated and no signature is required.



Bill payment

Status:	Successful
Reference number:	3029407755
Transaction date:	06 Mar 2016 17:26:49
Amount:	RM61.00
From Account:	512482050967 M2U Premier
Corporation name :	Lembaga Hasil Dalam Negeri - (LHDN - Semenanjung)
Payee Code :	7861
Tax Payer Name :	FOO CHEE YONG
Payment Code :	084-Bayaran Ansuran Cukai - Individu
Assessment Year :	2016
Installment Number :	1

Note: This receipt is computer generated and no signature is required.





LEMBAGA HASIL DALAM NEGERI MALAYSIA
CAWANGAN CHERAS
TINGKAT 8 - 12, MENARA PGRM
NO 8, JALAN PUDU ULU
56100 KUALA LUMPUR
WP KUALA LUMPUR

CP500 [Pin.1/2016]

No. Telefon : 03-92074200
No. Faks : 03-92875466
Laman Web : <http://www.hasil.gov.my>

NOTIS BAYARAN ANSURAN
DI BAWAH SEKSYEN 107B, AKTA CUKAI PENDAPATAN 1967

KEPADA
ENCIK FOO CHEE YONG
NO 21 JLN PUTRA PERMAI 10/2J
SEKSYEN 10 PUTRA HEIGHTS
47650 PUCHONG
SELANGOR

NO. RUJUKAN
[No. Kad Pengenalan /
Polis / Tentera / Pasport]

750701715053

NO. CUKAI PENDAPATAN

OG 11297329090

TAHUN TAKSIRAN

2016

MENURUT PERUNTUKAN SUBSEKSYEN 107B(1) AKTA CUKAI PENDAPATAN 1967, DENGAN INI TUAN ADALAH DIKEHENDAKI MEMBUAT BAYARAN SECARA ANSURAN BAGI CUKAI UNTUK TAHUN TAKSIRAN YANG DINYATAKAN MENGIKUT AMAUN DAN TARIKH KENA BAYAR SEPERTI JADUAL BERIKUT:

ANGGARAN CUKAI: RM **370.00**

JADUAL ANSURAN		
NO. ANSURAN	TARIKH KENA BAYAR	AMAUN (RM)
1	1/3/2016	61.00
2	1/5/2016	61.00
3	1/7/2016	61.00
4	1/9/2016	61.00
5	1/11/2016	61.00
6	1/1/2017	65.00

TAN SRI DATUK WIRA DR. HJ. MOHD SHUKOR BIN HJ. MAHFAR
Ketua Pengarah Hasil Dalam Negeri
Lembaga Hasil Dalam Negeri Malaysia
Tarikh : 10/02/2016