

UNIT 305, BLOCK A
PHILEO DAMANSARA I
JALAN 16/11
OFF JALAN DAMANSARA
46350 SELANGOR
TEL: 03 - 7954 9500
FAX: 03 - 7954 9400
WEBSITE: www.fpam.org.my
GST TAX FILE NO. 000173154304

## **CERTIFIED MEMBER - NOTICE OF RECERTIFICATION**

					Outstanding
Date	Fees Code	Trx Details	Amount	0% GST	Balance (RM)
01.01.2023	RENEWAL	Being membership fees for January 2023 to December 2023	410.00	0.00	410.00
01.01.2024	RENEWAL	Being membership fees for January 2024 to December 2024	410.00	0.00	410.00
01.01.2024	TALIAL ANAL	being membership rees for sundary 2024 to become 2024	410.00	0.00	
		<u> </u>			820.00
I.		(Name);(Membersh	in No.), hereby autho	rise FPAM to char	ge RM820.00
	card as follows :	(name),(members)			Be
to my create	cara as ronows.				
Credit Card (Direct Debit): VISA / MASTER / AMEX					
Card Number :					
Card Exp	iry Date :	(IVIIVI/ Y Y )			
~ Certified mi	emhershin fee is inclusive	of the US\$39.50 payable annually to Financial Planning Standards Board	l Itd (FPSB)		
certified membership fee to missaine of the corporate annually to manatal naming standards sound and first from					
If you hold a Capital Market Services Licence, please indicate Licence no					
Other paym	ent Modes:				
☐ By Cash : RM (payment to be made in person at FPAM's office only)					
☐ By Online / ATM transfer to FPAM Alliance bank account no: 1210 9001 0005 395 or Maybank account no: 5140 7512 8677					
(Please p	rovide copy of payme	ent receipt for tracking)			
☐ By Chequ	ie (made payable to <b>F</b>	FINANCIAL PLANNING ASSOCIATION OF MALAYSIA)			
Cheque	No :	Amount :			
AUTO DEBI	FOR FUTURE PAYM	ENT OF ANNUAL MEMBERSHIP FEES: YES	/ NO (CIRCLE)		
In the event that payment using the above credit card is declined, your auto debit instruction will not be activated. FPAM shall contact you to					
request for the new credit card number. If you have any queries on this statement, please call or email to <b>membership@fpam.org.my</b>					
request for the new Great care namber. If you have any queries on this statement, please can of email to membershipe/pull.org.iny					
Other Informa	ation (must be completed	d by Associate & Certified members)		YES	NO
Have you ever been charged or convicted in court of law, or are there any pending charges?					
Have you had a business related licence, registration or membership revoked, denied or suspended?					
Are you an undischarged bankrupt or ever been declared bankrupt?					
Have you ever been refused membership of a statutory professional or other body in respect of your professional capacity?					
Have you ever been subject to disciplinary proceeding or expelled by a statutory body in respect of your professional capacity?					
Have you ever been dismissed or had a proper authority withdrawn on ethical or legal grounds?					
Have you ever have past or pending claims made against your professional indemnity insurance in relation to financial advice?					
Note: If you have answered YES to any of the above questions, please attach the relevant documents which provide full details of the matter.					
Declaration (by	Associate & Certified memb	pers only)			
I hereby agree to abide by FPAM's Professional Responsibility and Code of Ethics and Rules for use of CFP CERT TM Marks. I hereby				Signature:	
declare that I have not committed any ethical violations or have any pending disciplinary proceedings (civil or criminal) against me.  Date:					
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5 CE points when you recertify your membership