



**THE EURASIAN ASSOCIATION, SINGAPORE
NOTIFICATION FOR OPTING OUT OF CONTRIBUTIONS
TO THE EURASIAN COMMUNITY FUND**

**To: The Eurasian Association, Singapore
139 Ceylon Road
Singapore 429744
Tel: 64471578 / Fax: 64473189**

THROUGH

Employer Name	
Employer Address	Postcode
Employer Tel & Fax	Contact Person

FROM

Employee Name	Employee NRIC No
Employee Address	Employee Tel/Mobile
Postcode	
Reason for Opting Out	

I hereby give notice in accordance with The CPF (Contribution of Community Fund [Eurasian Association]) RULES 1995, that with effect from _____(month/year), I wish to opt out of monthly contributions to the Eurasian Community Fund.

Employee Signature/Date

Employer Authorised Signature & Stamp/Date

Please note

1. Employee to fill in the form and submit to the Employer.
2. Employer to fax the completed form to The Eurasian Association at 6447 3189.
3. This form must bear The Eurasian Association official stamp and authorised signature.
4. The certified form will be faxed to the employer for processing.

**Certified by
The Eurasian Association**