

申請提取或退保付款 Request for payment by withdrawal or surrender

本表單適用對象 WHO IS THIS FORM FOR

本表單適用於希望以提取或退保申請付款的保 單持有人。

This form is for policyholders who wish to request a payment by a withdrawal or surrender

根據您持有保單的時間長短以及設立保單的條件,當一或多個保單部分完成兌現時,可能產生退保罰金。如果您從保單內提取資金,可能需支付提早提取罰金。在申請提取之前,請參閱您的保單資訊。

Depending on how long you have held your policy and the terms on which it was set up, there may be a surrender penalty where one or more policy segments are cashed in. If you are requesting a withdrawal from your policy early withdrawal penalties may apply. Please consult your policy literature before requesting a withdrawal.

請注意,如果您已提交完全退保申請,則不得 進行提取操作。

Please note withdrawals are not permitted where you have submitted a request to surrender your policy in full.

填寫此表單 COMPLETING THIS FORM

為協助我們盡快處理您的申請,請確保完整填寫本表單,並提供第2頁檢查清單中列出的所有文件。我們需要您提供這項重要資訊,以協助我們履行監管義務,確保我們的記錄為最新狀態。

In order to help us process your request as quickly as possible, please ensure this form is completed in full, and all documents listed in the checklist on page 2 are provided. We need you to provide this important information to help us fulfil out regulatory obligations to ensure our records are up to date.

請注意,未能提供這些資訊可能導致您的申請 延遲,且保單中的資產或資金可能無法出售, 也可能無法完成付款,除非滿足我們的所有要 求為止。

Please note that failure to provide this information may result in your request being delayed and assets or funds held in your policy may not be sold and payment may not be released until all of our requirements have been met.

填寫本表單即表示您希望從保單中提取資金。 我們建讓您在執行此操作前與財務顧問諮詢, 他們才能協助您了解任何可能適用的稅務 費用。

By completing this form you are requesting a payment from your policy. We recommend that you speak to your financial adviser before doing this, so that they can make you aware of any tax charges that may apply.

如果您在填寫本表單時需要協助或需要進一步 的資訊,請致電 +44 (O) 1624 821212 或傳 送電郵至 customerservices@fpiom.com, 與我們的客戶服務團隊聯絡

If you need help completing this form or require further information please contact our Customer Services Team on +44 (0) 1624 821212 or alternatively you can email us at customerservices@fpiom.com

我們僅接受所有個別所有人、受託人或授權簽署人簽署之本指示的掃描副本。請注意,我們不需要正本,但將保留在我們認為適當之情況下要求提供正本的權利。請將正本保留在您的記錄中。

We will only accept a scanned copy of this instruction if it has been signed by all individual owners, trustees or authorised signatories. Please note we do not require the original copy, however we do reserve the right to ask for the original documents if we deem this appropriate. Please retain the originals in your records.

請使用全大寫字母填寫本表單。 Please complete this form in BLOCK capitals throughout.

請務必閱讀本表單中的重要提示一節。 Please make sure you read the important notes section of this form.

在填寫本表單之後 WHEN YOU HAVE COMPLETED THIS FORM

請將填妥的表單傳送至 customerservices@fpiom. com[,]或者郵寄至:

Please send the completed form to **customerservices**@ **fpiom.com** or alternatively you can post this to:

客戶服務 Customer Services 英國友誠國際有限公司 Friends Provident International Royal Court Castletown Isle of Man IM9 1RA British Isles

我們將在付款完成後通知您。 We will notify you once payment has been made.

檢查清單 CHECKLIST

以下是我們處理您的要求時需要的主要資訊。在填寫表單時,請勾選每個方塊以確認您已提供相關資訊:

This is the key information we need to fulfil your request. Please tick each box to confirm you have supplied this information when completing the form:

我已提供保單號碼 I have provided the policy number

如果我的居住國與受款銀行所在國不一致,我已提供明確的說明 Where my country of residence and country of beneficiary bank does not match I have given a clear explanation

我已提供經認證的地址驗證文件與身分證明文件 I have provided certified verification of address and proof of identity

我已提供我的稅務資訊,並在適用情況下於「其他資訊」一節中詳述我在其他國家/地區的稅務居住資訊 I have provided my tax information and where applicable I have provided details of other countries I am resident in for tax in the Additional Information section

我已選擇希望提取款項支付的貨幣種類 I have selected the desired currency in which to be paid for the withdrawal

如果付款將匯入我未曾向您提及的帳戶,我已提供該銀行帳戶的對帳單副本 Where payment is being made to bank account I have not previously told you about, I have provided a copy of the bank statement

在適用情況下,我已檢查我的現金帳戶並確認有足夠現金可供提取如果我用於支付提取金額的現金不足,我已填寫「資產出售」一節 Where applicable, I have checked my cash account and I have sufficient cash available for the withdrawal. Where I don't have sufficient cash to pay the withdrawal I have completed the Sale of Assets section.

我在提交時已確保該表單不可編輯,且未使用任何貼上的簽名 I have ensured the form is not in an editable format when submitting and I have not pasted on any signatures

所有保單持有人均已閱讀並簽署聲明 All policyholders have read and signed the declaration

我已手動簽署表單或以合法的數位方式完成,其中包括稽核報告 I have either hand signed the form or completed it using an acceptable digital format which includes the audit report

我們可接受以下數位簽名: We can accept the following digital signatures:

- DocuSign
- AdobeSign
- Pandadoc
- Sign Now
- Zoho Sign

請確保在提交表單時附上相關的稽核報告。

Please ensure the relevant audit report is included when sending the form in.

我們非常重視您的保單安全。因此,我們可能會不時透過電話與您聯絡以驗證您的身分。如果未完成這通簡短的通話,我們可能無法處理您的申請。 We take the security of your policy very seriously. Therefore, from time to time we may contact you by telephone to verify your identity. Without completing this short call, we may not be able to action your request.

我了解英國友誠國際有限公司的一名代表可能與我聯絡以驗證我的身分 I understand a member of Friends Provident International may contact me to verify my identity

| 保單持有人/實益擁有人詳細資料 | 부 Policyholder/ben | eficial owner details | | | | |
|--|-------------------------------------|--------------------------|-------------------|---|---------------------------|---------------|
| 保單編號 Policy number | | | | | | |
| | 單持有人 1 licyholder 1 | | | 保單持有人 2 (如適用) Policyholder 2 (if appli | cable) | |
| 名字 First name(s) | | | | | | |
| 姓氏 Last name(s) | | | | | | |
| 別名(如適用) Alias (if applicable) | | | | | | |
| 聯絡詳細資料 Contact details 請注意,如果您的聯絡資訊與我 申請處理進度。 Please note if your contact c residential address has chan | 們記錄中的資料不符,! details do not match | with those held on our | records, this may | delay the payment whi | lst we verify them. If yo | our |
| 居住地址 Residential addres | s | | | | | |
| 地址行 1 Address line 1 | | | | | | |
| 地址行 2 Address line 2 | | | | | | |
| 地址行 3 Address line 3 | | | | | | |
| 城市 City | | | | | | |
| 郵遞區號 Postcode | | | | | | |
| 國家/地區 Country | | | | | | |
| 國際電話區碼 International dialing code 電話號碼 Telephone number 電郵地址 Email address | | | | | | |
| 就業詳細資料 Employment d | etails | | | | | |
| 職業 Occupation | | | | | | |
| (如果已退休或待業中,請填寫 | 以前的職業)(previou | us occupation if retired | or unemployed) | | | |
| 就業狀況 Employment status | 受僱 Employed | 自僱 Self employed | 退休 Retired | 受僱 Employed | 自僱 Self employed | 退休 Retired |
| | 待業 Unemployed | 家庭主婦 Homemaker | | 待業 Unemployed | 家庭主婦 Homemaker | |
| 退休/待業/成為家庭主婦的日期 Date of retirement/unemplo | yment/became home | emaker | | | | |
| 僱主姓名 | | | | | | |
| Name of employer | | | | | | |
| 僱主地址 | | | | | | |
| Employer address | | | | | | |

信託詳細資料 (如適用) Trust details (if applicable)

信託名稱 Trust name

地址行 1 Address line 1

地址行 2 Address line 2

地址行 3 Address line 3

城市 City

郵遞區號 Post code

國家/地區 Country

國際電話區碼

International dialing code

電話號碼

Telephone number

電郵地址

Email address

公司詳細資料 (如適用) Company details (if applicable)

公司名稱 Company name

地址行 1 Address line 1

地址行 2 Address line 2

地址行 3 Address line 3

城市 City

郵遞區號 Post code

國家/地區 Country

利得稅參考編號

Company tax reference number

公司 FATCA GIIN

Company FATCA GIIN

國際電話區碼

International dialing code

電話號碼

Telephone number

電郵地址

Email address

退保申請 SURRENDER REQUEST

保單全額退保 保單個別部分全額退保

Full surrender of policy Full surrender of individual policy segments

如果您正在退保部分保單,請告訴我們退保的份數

If you are surrendering policy segments, please tell us how many to surrender

財務狀況可能在多年來有所改變,且我們希望確保您了解所有可用的選項,以便在實現長期儲蓄目標時,為您提供做出正確選擇的最佳機會。提早兌現可能產生高 額罰金。如果您想討論可能的替代選項,請聯絡我們的客戶服務團隊。

Financial circumstances can change over the years, and we want to ensure that you understand all the options available to you, to give you the best opportunity to do what's right for you when looking to reach your long-term savings goals. Early encashment can incur high penalties. If you would like to discuss alternative options that may be available, please contact our Customer Services Team.

我知悉將對我的保單產生之任何罰金,並且想繼續進行退保。

I am aware of any penalties that will be taken on my policy and I would like to proceed with the surrender.

無罰金最大提取金額申請 MAXIMUM WITHDRAWAL WITHOUT PENALTY REQUEST

在不觸發退保罰金的情況下的最大提取金額。 The maximum withdrawal without triggering a surrender penalty.

提取申請(適用於一次性提取和定期提取) WITHDRAWAL REQUEST (TO BE COMPLETED FOR ONE OFF REQUESTS AND REGULAR WITHDRAWALS)

申請的提取金額

Requested withdrawal amount

提取頻率 Withdrawal frequency 一次性 One-off

如果申請的提取金額無法提供,請提取可用的最大金額 If the requested withdrawal amount is not available

then please proceed with withdrawing the maximum amount available

關於定期提取 For regular withdrawals

每月 每季 每半年 每年 Frequency: Monthly Quarterly Half-yearly Yearly

定期提取的起始日期(請參閱重要提示)

Date the regular withdrawal is due to commence (see important notes)

您是否想取消所有現有的定期提取? 否 Would you like to cancel all existing regular withdrawals? Nο Yes

提取/退保所需貨幣 REQUIRED CURRENCY OF WITHDRAWAL/SURRENDER

請注意在特定產品的情況下,提取/退保僅能以原始計劃的貨幣支付。選擇不同的貨幣將涉及貨幣兌換,且您收到的金額可能少於預期的等值金額。 Please note that for certain products, withdrawals/surrenders can only be paid in the original plan currency. Selecting a different currency will result in a currency conversion and you may receive less than the equivalent amount in your desired currency.

貨幣(請參閱重要提示)

Currency (see important notes)

學費 School fees

請使用貨幣 ISO 標準格式。例如,美元請使用 USD。 Please use currency ISO standard format. For example for US Dollars please enter USD.

提取/退保理由 REASON FOR WITHDRAWAL/SURRENDER

我們致力於改善客戶體驗,因此請告訴我們您提出申請的原因。 We are dedicated to improving our customer experience and as such, please tell us your reason(s) for your request.

產品收費高昂 High product charges 轉移至另一家提供者 Moving to another 購屋 House purchase provider

客戶服務品質不佳 Poor customer service 付款條件完成(已到期) Payment terms

completed (Matured) 緊急資金需求 Urgent money requirements 緊急醫療情況 Medical emergency

不當銷售產品 Mis-sold product 收費期結束 End of charging period 稅務原因 Tax reasons

財務問題 Financial concerns

投資策略變更 Change of investment strategy 無法繳納後續保費 Unable to pay further

其他(請說明) Other (please specify)

投資報酬率不佳 Poor investment returns

付款指示:銀行手續費將由您負擔 PAYMENT INSTRUCTIONS - BANK CHARGES WILL BE INCURRED BY YOU 付款方式 Payment method BACS(僅限英國的英鎊賬戶) BACS (GBP account in the UK only) 電子匯款 (TT) Telegraphic Transfer (TT) 銀行名稱 Bank name 銀行地址行 1 Bank address line 1 銀行地址行 2 Bank address line 2 銀行地址行 3 Bank address line 3 城市 City 郵遞區號 Post code 國家/地區 Country 帳戶持有人姓名 Account holder's name 帳戶貨幣(如適用) Account currency (if applicable) 請使用貨幣 ISO 標準格式。例如,美元請使用 USD。 Please use currency ISO standard format. For example for US Dollars please enter USD. 帳戶號碼或 IBAN Account number or IBAN Swift/BIC 代碼 Swift/BIC Code 銀行清算代碼(僅限 BACS 付款) Bank Sort Code (BACS payments only) 請確認您與銀行帳戶所在國的連結關係 (如果與您的居住地不同) Please confirm your connection to the country where your bank account is held if this differs to your residency 受款/中介/往來銀行詳細資料(如適用) ROUTING/INTERMEDIARY/CORRESPONDING BANK DETAILS (IF APPLICABLE) 受款銀行名稱 Routing bank name 受款銀行帳戶號碼

Routing bank account number

受款銀行 Swift 代碼 Routing bank Swift code

分行代碼 Branch Code

(香港付款) (Hong Kong payments)

ABA 編號(美國付款)

ABA number (US Payments)

資產出售(僅限提取) SALE OF ASSETS (WITHDRAWALS ONLY)

請列出任何持有的資產及您希望出售的金額、貨幣、單位數量或百分比,以用於資金提取。 Please list any holdings and the amount, currency or unit amount / percentage you wish to sell in order to fund your withdrawal.

| 現金金 額 Cash Amount | 單位金 額 Unit Amount | 百分比 (%) Percentage (%) | ISIN/SEDOL/完整股票代號用於兌換交易資產 ISIN/SEDOL/Full Ticker for exchange traded assets | 投資名稱 Investment Name | 結算貨幣 Settlement Currency |
|-------------------------|-------------------------|------------------------------|---|----------------------|--------------------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

其他資訊 ADDITIONAL INFORMATION

重要提示 IMPORTANT NOTES

退保 Surrender

可能適用提早兌現費用或退保費用。我們建議您在填寫本表單之前,先取得退保報價並與您的財務顧問諮詢。 An early encashment charge or surrender fee may apply. We recommend you obtain a surrender quotation and speak to your financial adviser before completing this form.

提取 Withdrawals

從保單中提取的任何金額將受限於保單資訊中詳述的最低提取金額。如果提取金額使得您的保單價值低於最低允許價值,則可能需要減少提取金額。 Any withdrawals taken from your policy will be subject to the minimum withdrawal amounts as detailed in your policy literature. The withdrawal amount may need to be reduced if it will take your policy below the minimum allowable policy value.

如果您要求從投資組合債券中定期提取資金,則我們只能在每月的 1 日或 14 日進行付款。 If you are requesting a regular withdrawal from a portfolio bond we can only make payments on 1st of 14th of the month.

提取/退保所需貨幣 Required currency of withdrawal/surrender

對於定期保費產品,所有付款將以您的保單/計劃貨幣支付。 For regular premium products all payments will be made in the currency of your policy/plan.

對於單筆保費產品,所有付款將以您在「提取/退保所需貨幣」一節中選擇的貨幣支付。 For single premium products all payments will be made in the currency you selected in the Required currency of withdrawal/surrender section.

稅務 Tax

我們建議您在處理保單事宜之前,與您的財務顧問或稅務專業人士討論您的稅務狀況。 We recommend that you speak to your financial adviser or tax professional about your tax situation before taking action on your policy.

對於英國居民,如果提取金額超過每個指定保單年度的累積可提取金額(初始投資及任何額外投資的 5%),則可能被徵收稅款。 UK residents may be subject to a tax charge if withdrawals are in excess of the 5% cumulative withdrawals available (of initial and any additional investments) in a given policy year.

請在「其他資訊」一節中詳細說明您身為稅務居民的任何其他國家/地區和相關稅務識別號碼。 Please detail any additional countries and associated tax identification number in which you are tax resident in the Additional Information section.

一般 General

根據您的保單價值所掛鈎的投資,有些投資經理可能備有相關條款與條件,導致我們無法及時實現現金價值,且可能延遲您的付款。 Depending on the investment(s) to which the value of your policy is linked, some investment managers may have terms and conditions that prevents us from realising a cash value in a timely fashion and this could delay your payment.

在適用情況下,請在提交付款申請前,確保我們持有之這份保單的授權簽署人名單為最新版本。如果授權簽署人變更且無法與我們的記錄相符,將導致付款延遲。 Where applicable, please ensure that the authorised signatory list(s) that we hold for this policy are up-to-date before submitting a payment request. Where authorised signatories have changed and we are unable to match those on this from with our records this will delay the payment.

我們可能還需要您提供進一步資訊,以遵守反洗錢相關規定。 We may also require further information from you for the purposes of Anti-Money laundering.

埴寫本表單 Completion of this form

任何不完整的指示將導致處理延遲,且我們對任何因此類延遲情況而產生的直接、間接、特殊或結果性損失或損害概不負責。 Any incomplete instructions will result in a delay in processing your instruction and we will not be liable for any direct, indirect, special or consequential loss or damages arising from such delay.

特定美國人 Specified US Person

特定美國人是指擁有美國公民或稅務居民身分的個人,且具有以下特徵之一:擁有美國居住地址/通訊地址;持有美國護照、美國綠卡;或在美國出生且尚未放棄其美國公民身分。更多 US FATCA 相關資訊請參閱以下網址:www.irs.gov/Businesses/Corporations/Foreign-Account-Tax-Compliance-Act-FATCA Specified US Person means a US citizen or tax resident individual who has a US residential/correspondence address or who either holds a US Passport, a US Green Card or who was born in the US and has not yet renounced their US citizenship. More information on US FATCA can be found at: www.irs. gov/Businesses/Corporations/Foreign-Account-Tax-Compliance-Act-FATCA

如果您選擇「是」以表示自己為特定美國人,則須向我們提供美國納稅人識別號碼 (TIN) 或美國社會安全號碼 (SSN)。 If you choose Yes to being a Specified US Person, you will need to provide us with your US Taxpayer Identification Number (TIN) or US Social Security Number (SSN).

如果您選擇「否」,但您擁有美國居住地址/通訊地址;持有美國護照、美國綠卡;或在美國出生,則須提供文件來證明自己正在或已經放棄美國公民身分。英國友誠國際有限公司可接受經認證的 DS-4083 表(即喪失國籍許可證明書,CLN)副本,以及/或您已取得新國籍所在國之經認證的護照副本。 If you choose No but you have a US residential/correspondence address, hold a US Passport, a US Green Card or you were born in the US, you will need to provide us with documentary evidence that you are in the process of or have renounced your US Citizenship. Friends Provident International can accept a certified copy of your DS-4083 form (also known as CLN - Certificate of Loss of Nationality) and/or a certified copy of your passport from the country in which you have obtained new citizenship.

聲明 DECLARATION

Are you a Specified US Person?

本人/本公司特此確認本人/我們已閱讀並同意上述相關章節中指明的重要注意事項及所有注意事項。本人/我們向英國友誠國際有限公司保證,無任何破產或清算程序已開始或正在進行中。 I/We hereby confirm that I/We have read and agreed with the Important Notes and all notes specified in the relevant sections above. I/We warrant to Friends Provident International Limited that no proceedings in bankruptcy or insolvency have been instituted or are pending against me/us.

本人/我們要求英國友誠國際有限公司根據保單條件,從上述保單中提取款項。本人/我們確認英國友誠國際有限公司根據本表單所載資訊進行的付款,將解除英國友誠國際有限公司對該筆付款的所有責任,前提是該付款依賴所提供資訊的真實性。 I/We request that Friends Provident International Limited makes a payment by withdrawal from the policy listed above in accordance with the Policy conditions. I/We acknowledge that a payment made by Friends Provident International Limited in accordance with the information contained in this form will discharge Friends Provident International Limited's liability in relation to that payment where it has relied on the veracity of the information contained therein.

本人/我們要求英國友誠國際有限公司根據保單條件,將上述保單退保。本人/我們確認英國友誠國際有限公司根據本表單所載資訊進行的付款,將完全解除英國友誠國際有限公司對該保單的所有責任。 I/We request that Friends Provident International Limited surrenders the policy listed above in accordance with the Policy conditions. I/We acknowledge that a payment made by Friends Provident International Limited in accordance with the information contained in this form will discharge Friends Provident International Limited's liability in full in relation to the policy.

所有保單持有人均已簽署聲明並閱讀英國友誠國際有限公司的私隱政策。 All policyholders have signed the declaration and read the Friends Provident International Limited privacy policy.

| | 權簽署人 1 ee/Authorised Sigr | natory 1 | | 保單持有人/受託人/授權簽署人 2 Policyholder/Trustee/Authorised Signatory 2 | | | |
|--|-----------------------------------|-------------|----------|--|-----------------------|------------------------------|--|
| 簽名 Signature | | | | | | | |
| | | | | | | | |
| | | 1 | | | | | |
| 簽署日期 Date signed | | | | | | | |
| 全名 Full name | | | | | | | |
| | | | | | | | |
| 稅務居住國 | | | | | | | |
| Country of tax residence | 9 | | | | | | |
| 稅務編號 (TIN) | or (TIN) | | | | | | |
| Tax Identification Number 第二稅務居住國(如適用) | er (TIN) | | | | | | |
| Second country of tax re | esidence (if applicable | 2) | | | | | |
| 第二稅務編號 (TIN) (如適用) | | • | | | | | |
| Second Tax Identificatio | n Number (TIN) (if ap | plicable) | | | | | |
| 您是特定美國人嗎? Are you a Specified US F | Person? | | 是 Yes | 否 No | 是 Yes | 否 No | |
| | | | | | | | |
| | 受託人/授權簽署人 3 Trustee/Authorised | Signatory 3 | | | 受託人/授權 Trustee/Aut | 簽署人 4 horised Signatory 4 | |
| 簽名 Signature | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 簽署日期 Date signed | | | | | | | |
| 全名 Full name | | | | | | | |
| | | | | | | | |
| 稅務居住國 Country of tax residence | e | | | | | | |
| 稅務編號 (TIN) | | | | | | | |
| Tax Identification Numb | er (TIN) | | | | | | |
| 第二稅務居住國(如適用) | | | | | | | |
| Second country of tax re | esidence (if applicable | e) | | | | | |
| 第二稅務編號 (TIN) (如適用) | | | | | | | |
| Second Tax Identificatio | n Number (TIN) (if ap | plicable) | | | | | |
| 您是特定美國人嗎? | | | 是 | 否 | 是 | 否 | |

Nο

Yes

Nο

Yes

資料保護/個人資料(私隱)條例(「PDPO」)個人資訊收集聲明(「PICS」) DATA PROTECTION/PERSONAL DATA (PRIVACY) ORDINANCE ('PDPO') PERSONAL INFORMATION COLLECTION STATEMENT ('PICS')

我們非常重視處理您的個人資料的責任,並且只會要求您提供處理您申請所需的詳細資料。請了解我們的隱私政策 — 請造訪 www.fpinternational.com/legal/privacy-and-cookies 查看完整政策,或者向我們的資料保護主任索取該政策。 We take the responsibility of handling your personal data very seriously and we will only ask you for details required to process your requests to us. Please be aware of our privacy policy - please visit www.fpinternational.com/legal/privacy-and-cookies to view the full policy, or this can be provided on request from our Data Protection Officer.

英國友誠國際有限公司:註冊及總辦事處:Royal Court, Castletown, Isle of Man, British Isles, IM9 1RA 馬恩島的註冊公司號碼為11494C 獲Isle of Man Financial Services Authority認可及監管 人壽保險及投資產品的供應商 獲

香港分公司辦事處:香港九龍灣宏遠街1號一號九龍803室 獲香港保險業監管局授權在香港經營長期保險業務

英國友誠國際為英國友誠國際有限公司的註冊商標及商號

Friends Provident International Limited: Registered and Head Office: Royal Court, Castletown, Isle of Man, British Isles, IM9 1RA. Isle of Man incorporated company number 11494C. Authorised and regulated by the Isle of Man Financial Services Authority. Provider of life assurance and investment products. Hong Kong branch: 803, 8/F., One Kowloon, No.1 Wang Yuen Street, Kowloon Bay, Hong Kong. Authorised by the Insurance Authority of Hong Kong to conduct long-term insurance business in Hong Kong. Friends Provident International is a registered trademark and trading name of Friends Provident International Limited.