

**DECLARATION OF EMOLUMENTS, PENSIONS AND COMPENSATION FOR LOSS OF OFFICE RECEIVABLE BY DIRECTORS OR PAST DIRECTORS**

**CLIENT:** **CO LTD**  
**Year Ended 31 December 2011**

- (A) Aggregate Emoluments:
- 1 Remuneration comprising fees, salaries, commission and bonus.
  - 2 Pension scheme / MPF contributions.
  - 3 Cash allowance less actual expenses.
  - 4 Estimated money value of benefits in kind.
    - (1) Accommodation:-
      - a) rent and rates/rateable value and rates.
      - b) expenses in connection therewith e.g. servants' wages, utilities.
    - (2) Leave allowance.
    - (3) Assets for personal use depreciation and expenses.
    - (4) Others (please give details).

Subtotal

(B) Aggregate pensions receivable (otherwise than under a contributory scheme) including superannuation allowances, superannuation gratuities or similar payments.

(C) Aggregate compensation for loss of office or in connection with retirement.

TOTAL

RECEIVABLE FROM THE COMPANY		RECEIVABLE FROM SUBSIDIARIES & ANY OTHER PERSON	
As Directors	For Other Offices	As Directors	For Other Offices
HK\$	HK\$	HK\$	HK\$
0			
0	0	0	0
0	0	0	0

Notes: (1) Section 161C of the Companies Ordinance imposes a duty on any director of a company to provide the required information in writing.  
 (2) The expression "any other person" includes any body corporate e.g. for the purposes of a subsidiary company's accounts, its holding company or any other company in the group or outside it.

Pursuant to Section 161 of the Companies Ordinance, I / we confirm that the above information relates to all the emoluments, pensions and compensation for loss of office receivable by me/us in respect of my/our services to the Company and its Subsidiaries whether these amounts are payable by the Company, by its Subsidiaries or by any other person.

In view of my shareholding interest in the Company, I agree to waive my right to claim in the future against the Company under Hong Kong Labour Ordinance for any shortage payment or compensation to me as an employee of long service payment, rest day, statutory holiday or annual leave. (if not applicable, please delete this paragraph)

Date

\_\_\_\_\_  
 Name and Signature of Director