

[The SEC logo]

**Report on Commencement or Termination Dates of
Duty Performance as a Mutual Fund Manager**

1. Company:.....

2. Name (Mr./Mrs./Ms.):..... Surname:.....
Identification No. of the Mutual Fund Manager:.....

3. Commencement of duty performance

Name of Mutual Fund	Since

Reason:.....
.....

4. Termination of duty performance

Name of Mutual Fund	Since

Reason:.....
.....

Authorized Signature:.....
(.....)

Position:.....

Date:.....

Affix the Company's seal (if any)

Remark: The Company shall report to the Office within 14 days from the next following date after the mutual fund manager commences or terminates duty performance.