

PROSPECTUS

THE GOVERNMENT OF THE COMMONWEALTH OF THE BAHAMAS BAHAMAS REGISTERED STOCK 2021, 2023, 2025, 2038 AND 2048 ISSUE OF B\$30,000,000 ISSUED UNDER THE BAHAMAS REGISTERED STOCK ACT

Prospectus Date: November 6, 2018

Issuer:	Bahamas Government	Open Date:	November 12, 2018 (9:30 a.m.)
Registrar:	Central Bank of The Bahamas	Close Date:	November 14, 2018 (3:00 p.m.)
Organizer:	Central Bank of The Bahamas	Settlement:	November 16, 2018
		First Int. Payment:	April 15, 2019 (short)
		Calendar:	Actual/365

The Central Bank of The Bahamas will not accept applications after 3:00 p.m. each day.

Security ID	Issue Size (B\$)	Unit Share (B\$)	Tenor (Years)	Interest (Fixed)	Maturity	Interest Payment
BRS 125121	2,000,000	100	3	2.76%	October 15, 2021	Semi-annual
BRS 125223	2,000,000	100	5	3.26%	October 15, 2023	Semi-annual
BRS 125225	3,000,000	100	7	3.87%	October 15, 2025	Semi-annual
BRS 125138	18,000,000	100	20	5.00%	October 15, 2038	Semi-annual
BRS 127048	5,000,000	100	30	5.50%	October 15, 2048	Semi-annual
	30,000,000					

Payments: Subscription amounts should be made electronically or via bank draft payable to the Central Bank of The Bahamas only. **CASH PAYMENTS WILL NOT BE ACCEPTED.**

Requirements: Applicants must present a NIB card and one additional form of identification: either a Driver's License or Passport. New Business customers must present a list of its authorized signatories along with a Memorandum / Articles of Association.

Refunds: Refunds will be made within three (3) business days following the closing date. No interest will be paid on amounts refunded.

Certificates: Results will be made available on the Central Bank's website and successful applicants can collect their certificates from the Central Bank 30 calendar days following settlement.

Application forms may be obtained from The Central Bank of The Bahamas' offices in Nassau and Freeport or from the Central Bank's website at www.centralbankbahamas.com. Additional details are also available on the website.

Application to Purchase The Government of The Commonwealth of The Bahamas Registered Stock

BGRS Issue Number:		Offering <input type="checkbox"/> PRIMARY (IPO) <input type="checkbox"/> SECONDARY		Application Date (DD-MM-YYYY)									
				D	D	—	M	M	—	Y	Y	Y	Y

[SECTION-1] To be completed by Primary Security Holder (Sole Name To be Represented on Certificate)

Existing Holder of BGRS?		PRIMARY APPLICANT: First Name		Middle Name	Last Name
Yes <input type="checkbox"/> No <input type="checkbox"/>					

ADDRESS INFORMATION

Street (#...Name)		Location/Island/Country	
Telephone [Home]	Telephone [Mobile]	Telephone [Work]	P. O. Box
Email		NIB#	
SIGNATURE		Date (DD-MM-YYYY)	

[SECTION-2] To be completed if BGRS is to be jointly held (more than one holder)

REGISTRATION TYPE

Choose one only

☐ **AND**
all parties required for completing transactions

☐ **OR**
either party may complete transactions individually

☐ **AND/OR**
parties together OR any one individually

Existing BGRS Holder?		SECONDARY APPLICANT: First Name		Middle Int.	Last Name	NIB#
[1] Yes <input type="checkbox"/> No <input type="checkbox"/>						
[2] Yes <input type="checkbox"/> No <input type="checkbox"/>						
In Trust For (if Applicable):						

ADDRESS, IF DIFFERENT FROM PRIMARY

Street (#...Name)		Location/Island/Country	
Telephone [Home]	Telephone [Mobile]	Telephone [Work]	P. O. Box
Email		NIB#	
SIGNATURE(S)		Date (DD-MM-YYYY)	

[SECTION-3] Primary Applicant's Bank Information

Bank Name		Branch Name		Account Number

[SECTION-4] Payment Information

Payment Type		Cheque Drawn on			Cheque Number
<input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Electronic		<input type="checkbox"/> BOB <input type="checkbox"/> CIT <input type="checkbox"/> CWB <input type="checkbox"/> FCI <input type="checkbox"/> FBL <input type="checkbox"/> RBC <input type="checkbox"/> SBL <input type="checkbox"/> ____			
CASH AMOUNT	CHEQUE AMOUNT	ELECTRONIC AMOUNT		TOTAL AMOUNT PAID	
\$	\$	\$		\$	
CBOB Officer [1] Signature	Initials [1]	Date (DD-MM-YYYY)	CBOB Officer [2] Signature	Initials [2]	Date (DD-MM-YYYY)
SUBSCRIPTION AMOUNT		CERTIFICATE NUMBER(S)			
\$					
CERTIFICATE(S) RECEIVED BY (Print Name)			Receiver's Signature		Date (DD-MM-YYYY)

I have read, understood, and accepted the information on the REVERSE OF THIS FORM

Initial Here: _____