

Beneficiary Form

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Investor Name

Account Reference No.

PRODUCT

☐ CFAL Money Market Investment Fund Ltd.

☐ CFAL Bond Fund Ltd.

☐ CFAL Balanced Fund Ltd.

☐ CFAL Global Fixed Income Fund Ltd.

☐ CFAL Global Equity Fund Ltd.

☐ CFAL Private Wealth Services

☐ CFAL Savings Express

☐ CFAL Advantage College Savings Plan

☐ CFAL Blue Marlin Retirement Plan

☐ Other _____

I, the undersigned, appoint the below beneficiary (ies) and authorize all monies from my investment in the above named product to be made payable to my beneficiary (ies) upon my death.

Indicate Status of the Beneficiary Designation

☐ Revocable

☐ Irrevocable

Name of Beneficiary (ies)

Relationship

Date of Birth

Percentage (%)

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Contingent Beneficiary (ies)

Should the person(s) designated above fail to survive me, then I designate the following alternate beneficiary (ies):

Name of Beneficiary (ies)

Relationship

Date of Birth

Percentage (%)

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

NEW

☐

UPDATE

☐

If update: This designation cancels and supersedes all designations previously made by me.

Signature (s)

DAY	MONTH	YEAR