Third Floor 308 East Bay Street Nassau, The Bahamas Tel: (242) 502-7010 Fax: (242) 393-4639



## SUBSCRIPTION FORM - CLASS A SHARES - CORPORATE / INSTITUTIONS

Name of Company/	Institution												
Contact Name													
Registered Address	3												
	CITY						COUNTRY						
Telephone		WORK			F	AX				P.O.BOX			
Online Access Req	uired?	YES	NO	Er	nail:								
Amount of Investment (US\$)				Investment Ac			t Account Number	imber					
	Minimum initial investment US\$5,000.00, Government Stamp Tax – 1.75% (To be completed by current shareholders of the Fund only)										nd only)		
	Please deduct the stamp tax from the investment amount I/we will send additional monies to cover the stamp tax												
Source of Funds													
	Required for all subscriptions over \$15,000.00												
CFAL Global Bond Fund Wire Transfer Details:Bank: CIBC FirstCaribbean (Swift: FCIBBSNS)Account Name: CFAL Global Bond Fund Ltd.Account Number: 201753591													
DECLARATION													
I/we hereby acknowledge that I/we have read The CFAL Global Bond Fund, Ltd. Offering Memorandum and accept the risks associated with the Fund. I/we declare that I/we am/are an eligible investor as defined in the Offering Memorandum and I/we waive the right to be sent copies of the financial statements of the Fund, which shall be available at the registered office of the Fund for inspection. I/we acknowledge that neither the Investment Manager nor any other person guarantees the return of capital, or the performance of the Fund.													
Source of funds (if applicable): I/we certify that the source of funds listed represents the true source of funds status as of this date, and the company's subscription to the mutual fund. I/we further declare that the proceeds declared are derived from legitimate sources.													
Authorized Signat	ure			Authoriz	zed Signa	ture			[		I I	YEAR	
(Please note the Company Seal MUST be affixed by all corporate entities)													
Please attach:													
		d copy of the ent les of Associatio				tific	ate of Incorporation	on,	,				
Certified c	or Notarized	d copy of list of a	authorized	signatorie	5								
Register o	r Listing of	Directors											
Verificatio	n of identif	ication for each	Director (C	Certified or	Notarized	d co	py of Passport)						
Proof of a	Proof of address for each Director (Certified or Notarized copy of utility bill, bank statement or voters card)												