CFAL Global Fixed Income Fund Ltd.

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 N	lame										
Registere	d Address										
		C						COUNTRY			
Telephon	е	WORK				FAX		P.O.BOX			
Online Ac	cess Requ	uired?	YES	NO	Em	nail:					
Amount of Investment (U		ent (US\$)				Investmen	t Account Number				
			Minimum initial investm	ent US\$5,000.00,	Government Sta	mp Tax – 1.75%		(To be completed by curre	ent shareholders	of the Fu	nd only)
			Please deduc	t the stamp ta	x from the inv	estment amou	nt I/w	ve will send additional	monies to c	over the	stamp tax
Source of	Eunde										
Source or	i unus	Poquired f	or all subscriptions over \$	215 000 00							
		CFAL GI Bank: CI	obal Fixed Income BC FirstCaribbean Name: CFAL Globa	Fund Wire Ti (Swift: FCIBB	SNS)	Branch:	Main Branch, Shirle Number: 20177233	ey Street (Transit: 097 30	06)		
DECLAR	ATION										
we declare the Fund, v	that I/we a which shall	ım/are an e be availabl	ligible investor as d	efined in the O	Offering Memo	orandum and I/v	we waive the right to	nd accept the risks as be sent copies of the the Investment Mana	e financial sta	atements	s of
			we certify that the seclare that the process					s as of this date, and t	he company	s subsc	ription
Authorized Signature			Authorized Signature					DAY M	НТИС	YEAR	
(Please n	ote the C	ompany S	Seal MUST be aff	ixed by all c	corporate er	ntities)					
Please	e attach:										
			ed copy of the er icles of Associat				ate of Incorporat	ion,			
(Certified o	r Notarize	ed copy of list of	authorized	signatories						
F	Register o	r Listing c	of Directors								
\	/erificatio	n of ident	ification for each	n Director (C	Certified or I	Notarized co	oy of Passport)				

Proof of address for each Director (Certified or Notarized copy of utility bill, bank statement or voters card)