

**SWITCH FORM (SALE/PURCHASE)** 

## **SWITCH FORM**

## **CBIS Global Funds plc**

An umbrella Fund with segregated liability between sub-funds
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Unless the context otherwise requires, all capitalized terms shall have the same meanings as in the Prospectus and any relevant Supplement of CBIS Global Funds plc (the "Company"). This form should be sent via fax and in original.

Investor Name	
	<u> </u>
Account number	

## I / We (strike out the word that does not apply) wish to switch shares as follows:

Sub-Fund to be Sold  Exchange — Redemption  (SWITCH OUT)	Currency	Nominal Number of SHARES to be sold (SWITCH OUT)	Sub-Fund to be bought  Exchange — Subscription (SWITCH IN)
European Short Term Government Bond Fund	EUR		
European Equity Fund	EUR		
World Bond Fund	EUR		
World Equity Fund EUR Share Class	EUR		
World Equity Fund USD Share Class	USD		

**TOTAL EURO AMOUNT** 

**TOTAL USD AMOUNT** 

I / We have received and considered a copy of the Prospectus, any relevant Supplement(s) or Addenda thereto and the Key Investor Information Document ("KIID"). I / We agree that the issue and allotment of Shares to me / us is subject to the provisions of the Prospectus, any applicable Supplement(s) or Addenda thereto and the KIID, that subscriptions for Shares will be governed and construed in accordance with Irish law and I / we confirm that, I / we am not relying on any information or representation other than such as may be contained in the Prospectus, any relevant Supplement(s) or Addenda thereto and the KIID. I / We hereby represent that I/we have regular access to the internet. I / we acknowledges that I / we have been offered the choice of receiving the KIID on paper and in electronic form by means of a website or by email and hereby specifically consent to receiving the KIID in electronic form by way of email or by accessing the latest version of the document online at <a href="https://www.cbisglobal.com">www.cbisglobal.com</a> (or such other website address as may be notified to from time to time).
Signature of authorised signatory
Name of authorised signatory (block capitals please):
Capacity (in case of a corporation) / Title of authorised signatory (if applicable)
Date