ACCOUNT OPENING APPLICATION FORM

CAM GLOBAL PORTFOLIOS PCC LIMITED

(A protected cell company registered with limited liability in Guernsey with registration number 42343 and authorised by the Guernsey Financial Services Commission as an authorised open-ended collective investment scheme of Class B)

IMPORTANT ACCOUNT OPENING INFORMATION

This duly signed Account Opening Form together with full Anti-Money Laundering (AML) Due Diligence Documentation (as per Section 6) and valid signed FATCA/CRS forms are required before an account can be opened. The original signed Account Opening Form together with original signature list (if applicable) and supporting copy bank statement must be returned to the Administrator's address to complete the account registration process.

The Account Opening form should be read in the context of and together with the most recent particulars and applicable supplemental particulars of the Company and save where otherwise defined in this application form, all capitalised terms shall have the same meaning as in the particulars (unless the context requires otherwise).

In this Application Form, "you" and "your" mean those signing this form on behalf of the Applicant.

Once a signed Account Opening Form and full **AML Due Diligence Documentation** is received, the Administrator will send the account number confirmation to the authorised contact(s) upon which you can **then** place dealing instructions (see Section 8, Appendix 1 for dealing information, Appendix 2 for payment details and Appendix 3 for subscription instruction). The account number must be specified on all forms to place transactions. **Subscription instructions and proceeds must not be forwarded until the account number confirmation is issued to you by the Administrator.**

ANY SUBSCRIPTION DEAL RECEIVED AS PART OF THE ACCOUNT OPENING FORM WILL BE REJECTED.

Incomplete Account Opening Forms (where compulsory information*[1] and AML verification documents have not been provided in advance) will be rejected and any subscription monies received will be returned. If an application is rejected, the Administrator at the cost and risk of the Applicant will, subject to any applicable laws, return application monies or the balance thereof, without interest, expenses or compensation by electronic transfer to the account from which it was paid (less any applicable bank charges where applicable).

ACCOUNT OPENING FORM GUIDE

SECTION 1: REGISTRATION DETAILS (this section must be completed)

SECTION 2: CONTACT DETAILS

SECTION 3: BANK DETAILS (this section must be completed)

SECTION 4: INVESTOR AML DUE DILIGENCE INFORMATION

SECTION 5: REPRESENTATIONS AND WARRANTIES

SECTION 6: INVESTOR AML DUE DILIGENCE DOCUMENTATION REQUIREMENTS

SECTION 7: TAX INFORMATION EXCHANGE SELF CERTIFICATION FORM

SECTION 8: APPENDICES

- Appendix 1 – Dealing Procedure
- Appendix 2 – Payment Details
- Appendix 3 – Subscription Form

1 Please note compulsory data that is required is name, address, date of birth (retail investors), email address, banking account details and Tax details*

CONTACT DETAIL FOR THE ADMINISTRATOR

Postal Address

Northern Trust International Fund Administration Services (Guernsey) Limited

PO Box 255, Trafalgar Court, Les Banques, St Peter Port, Guernsey, GY1 3QL

Telephone: +44 1481 745194

Facsimile: +44 1481 745059

Email: CAMGLOBAL_TA@ntrs.com

Email for PDF instructions: camglobaltainstructions@ntrs.com

You acknowledge that you will notify the Administrator in writing if you are opening or operating the Account on behalf of any third party or parties or in any capacity other than your own sole capacity and have provided the Administrator the name or names of the third party or parties concerned. You acknowledge that the Administrator reserves the right to refuse to open or continue to operate any Account that you wish to operate on behalf of any third party or parties at the Administrators absolute discretion. The Administrator may do this without giving you any reason.

CONTACT DETAIL FOR THE MANAGER

Postal Address

CAM Global Limited

No 1 Upper Ground Floor, Royal Terrace, Royal Avenue, St Peter Port, Guernsey, GY1 2HL

Telephone: +44 1481 758 600

Email: info@camglobal.gg

DEFINITIONS

The following words shall have the meanings opposite them unless the context in which they appear requires otherwise:-

SECTION 1: REGISTRATION DETAILS (THIS SECTION MUST BE COMPLETED)

INSTITUTIONAL / CORPORATE INVESTORS

Company Name:		
Company Trading Name: (if different)		
Account Designation: (if applicable) Registered Address:		
Postcode:		
Registered / Incorporated in:		
Registration number:		
Regulated by: (where applicable)		
Date of Incorporation		
Type of activities undertaken by the Company:		
Jurisdiction of Entity's Activity:		
Names and date of birth of Company Directors	**Name:**	**Date of birth:**
Telephone Numbers: (including international dialling codes)		
Key Contact: & Email:		
Operating / Business Address:		

INDIVIDUAL/JOINT SHAREHOLDERS

Shareholder 1		Shareholder 2
	Title:	
	Surname:	
	Forenames:	
	Any former names (such as maiden name):	
	Any other names by which you are known:	
	Nationalities:	
	Date of Birth:	
	Town / City of Birth:	
	Country of Birth:	
	Occupation: Residential Address:	
	Postal Code:	
	Tel No's (home/work)	
	e-mail:	
	Are you a US citizen / US resident?	
	Country of Tax Residency:	
	Tax Identification Number:	

SECTION 2: CONTACT DETAILS

Please note that an email address is compulsory for the welcome email which will contain the account number confirmation required to place transactions.

Please also note that only the email addresses confirmed on this form will be eligible to receive information or documentation, including contract notes and statements, in relation to the registered account.

If the Administrator receives a request from an unauthorised email address, the requester will be asked to submit an instruction to update the account with the additional email address(es). This instruction should be signed in accordance with the registered accounts' authorised signatory list.

EMAIL ADRESS **(Please ensure the appropriate document is selected to ensure receipt otherwise all options will be selected)**	**Welcome Email** ✓	**Contract Note** ✓	**Statements** ✓

SECTION 3: BANK DETAILS (THIS SECTION MUST BE COMPLETED)

Important information regarding bank accounts for subscriptions and redemptions

Third party payments are not permitted for redemptions. Please confirm the details of the bank accounts from which and to which payments will be made below.

Bank account evidence documentation must include one of the below:

- Original or copy printed bank statements (no more than 3 months old) on headed paper showing the investor's name, address and account details OR
- Printed correspondence from the bank which confirms the investor's account name, address and account details, duly certified as a true copy of the original

To meet our anti-money laundering and counter terrorist financing obligations under the current legislation, all joint bank account holders will be required to complete identity and verification requirements, even where those joint bank account holders will not be registered holders of shares or units in the fund.

Failure to provide all the bank account information and documentation requested as part of this application may result in a delay in setting up the account and subscribing to the funds.

BANK ACCOUNT DETAILS FOR SETTLEMENT OF REDEMPTION (AND DIVIDEND/DISTRIBUTION PROCEEDS IF APPLICABLE)

Name of bank:	
Branch name:	
Address:	
Name of accountholder:	
Account number:	
Sort code:	
SWIFT code:	
IBAN if applicable:	

IMPORTANT: Verification by the bank of the identity of the accountholder(s) will be required before payments can be made to bank accounts other than the one stated above.

DISTRIBUTION / DIVIDEND OPTION

UNLESS REQUESTED OTHERWISE DISTRIBUTIONS (IF ANY) WILL AUTOMATICALLY BE REINVESTED.

PLEASE TICK THE BOX BELOW IF YOU WANT TO RECEIVE A CASH PAYMENT BY TELEGRAPHIC TRANSFER INSTEAD. ☐

NOTES:

1. If you have elected not to reinvest your distributions all distribution payments will be made by way of telegraphic transfer to the account indicated under "Distributions and Redemptions" above.
2. Account must be in the applicant/investor's own name and third-party payments are not allowed.

SECTION 4: INVESTOR AML DUE DILIGENCE INFORMATION

(section must be completed by all applicants)

4.1 SOURCE OF FUNDS

Please indicate the original source of funds for this investment, e.g. the activity which generated the funds.

4.2 POLITICALLY EXPOSED PERSONS

Are any of the following Politically Exposed Persons (PEPs), or related to/connected to PEPs:

(i) Individual applicant(s)

(ii) Beneficial owner or controller of the company

(iii). Directors

(iv). Authorised signatories

☐ Yes ☐ No

If "Yes" please provide details

4.3 DUE DILIGENCE DOCUMENTATION- LEVERAGE ACROSS INVESTMENTS

I hereby authorize the Administrator to leverage the due diligence documentation provided for the purposes of compliance with applicable regulatory requirements across all investments which I currently hold/ may hold in the future across all funds which are administered by the Administrator.

☐ Yes ☐ No

4.4 DUE DILIGENCE DOCUMENTATION- ULTIMATE BENEFICIAL OWNER

Please complete the relevant section to your entity type. The Ultimate Beneficial Owner section must be completed. Non-completion could delay acceptance of account opening.

Ultimate Beneficial Owners are individuals who directly or indirectly hold ownership of 25% or more of the shares or voting rights in an entity, or control of the entity (including through Bearer Shareholdings). Where there is no person identified as beneficial owner, the natural person(s) who hold the position of senior managing official(s)/director(s) will be deemed the beneficial owners. Where the beneficial owner is the senior managing official, verify the identity of that person.

* In cases where shareholder(s) are entities with 25% or more ownership or control, please provide the details of Individual(s) who hold beneficial ownership 25% or more. For Trusts or similar arrangements, Ultimate Beneficial Owners include the beneficiaries, the settlor, the trustee(s) and the protector (if any). The beneficiaries are the individuals benefiting from the trust or similar legal arrangement.

Please complete the below regarding Ultimate Beneficial Owner(s):

Name	Address	Nationality	Date of Birth

Note: If there is/are no Individual(s) with a beneficial interest of 25% or more (either directly or indirectly) of the shares or voting rights of the entity, or anyone that otherwise exercises control of the entity (where applicable), please check the box and insert applicable senior managing official(s) below whom will be deemed the UBO:

☐

Name	Address	Nationality	Date of Birth

4.5 RELATED PERSON DETAIL

Full names of all Related Persons:

- In the case of natural persons, Related Persons means any person authorised to act on behalf of the investor
- In the case of a company, Related Persons means the directors.

- In the case of a Partnership, Related Persons means the partners.
- In the case of a limited liability company (LLC), Related Persons means the managing members.
- In the case of a trust, foundation or similar legal arrangement, Related Persons means the trustees.
- In the case of a charity/government body/ university/ school/ college/ club/ society, Related Persons means the authorising officers/ board members/ officials.

Please complete the below:

Name	**Address**	**Nationality**	**Date of Birth**

Declaration - I/We declare that the information contained in this form and the attached documentation, if any, is true and accurate to the best of my/our knowledge and belief.

Signature 1 _____ PrintName _____ Date_____

Signature 2 _____ Print Name _____ Date_____

PLEASE REFER TO SECTION 6 FOR ANTI-MONEY LAUNDERING AND DUE DILIGENCE DOCUMENTATION REQUIREMENTS

SECTION 5: REPRESENTATIONS AND WARRANTIES

(section must be completed by all applicants)

5.1 ANTI-MONEY LAUNDERING AND COUNTERING TERRORIST FINANCING

As a 'Financial Services Business' subject to financial regulation in its home jurisdiction, the Applicant warrants that, in accordance with all relevant statutory or regulatory requirements:

1. the Applicant has established and maintains anti-money laundering and countering terrorist financing policies ("AML/CFT Policies");

2. the Applicant is in compliance with the said AML/CFT Policies;

3. the said AML/CFT Policies have been approved by counsel or internal compliance personnel reasonably informed of anti-money laundering and countering terrorist financing policies and their implementation;

4. the Applicant has not received a deficiency letter, negative report or any similar determination regarding such AML/CFT Policies from independent accountants, internal auditors or some other person responsible for reviewing compliance with the said AML/CFT Policies;

5. the Applicant will provide a copy of such AML/CFT Policies to the Relevant Service Provider upon demand;

6. the applicant operates procedures which includes testing/matching or scanning related parties and beneficial owners through the OFAC and other relevant sanctions lists;

7. the applicant confirms that they have appropriate risk-grading procedures in place to differentiate between the Customer Due Diligence ("CDD") requirements for high and low risk relationships;

8. the applicant confirms they conduct enhanced CDD measures for Politically Exposed Persons and other high risk relationships;

9. the applicant confirms they have sufficient information to enable them to understand the purpose and nature of the overall relationship; and

10. the applicant confirms that the account will only be operated by the authorised signatories.

If the Applicant is/are purchasing the Participating Shares as trustee, agent, representative, intermediary, nominee or in any similar capacity for any other person(s) or entity intending to retain a beneficial interest, or to exercise either direct or indirect control over the Participating Shares (the "Underlying Principal(s)"), the Applicant warrants that the Applicant:

1. has verified the identity and residential address of each of the Underlying Principal(s);

2. will retain documentary evidence of such verification checks for a period of at least six years after the cessation of the relationship;

3. has reasonably established and documented that each of the Underlying Principal(s) is not involved in criminal activity and that the source of monies used to purchase the Participating Shares has not been derived from criminal activity;

4. will disclose details of each of the Underlying Principal(s) as required by prevailing anti-money

laundering regulations or other applicable laws and will provide copies of any and all such related documents upon the demand of any Relevant Service Provider; and

5. that the account will only be operated by the intermediary and its authorised signatories and that the intermediary has ultimate, effective control over the financial product or service.

5.2 DECLARATIONS ON BEHALF OF THE APPLICANT

1. I/We confirm that I /we have the full right, power and authority to make the investment pursuant to this Application Form whether this investment is in my/our own name or is made on behalf of another person or institution.

2. I/We hereby represent and acknowledge that I/we have received and fully read and understood the Particulars and that I/we have received the Company's latest annual report and accounts. I/We hereby confirm and declare that this application is based solely on the information contained in such documentation and is made pursuant to the terms of this Application Form and that I/we am/are bound by the terms of the Particulars and this Application Form.

3. We am/are aware that copies of the Particulars, latest annual report and accounts may be obtained from the registered office of the Company at PO Box 255, Trafalgar Court, Les Banques, St Peter Port, Guernsey GY1 3QL.

4. I/We agree that the issue and allotment to me/us of the Participating Shares is subject to the provisions of the Particulars, that subscription for Participating Shares will be governed and construed in accordance with Guernsey law and I/we confirm that by subscribing for Participating Shares, I/we are not relying on any information or representation other than such as may be contained in the Particulars and the most recent annual report and accounts.

5. In the event of any dispute or claim arising under this Application Form or the Particluars, or relating to the Participating Shares I/we submit to the exclusive jurisdiction of the Courts of the Island of Guernsey.

6. I/We acknowledge that the Company reserves the right to reject any application in whole or part without assigning any reason therefore.

7. I/We certify that I am/we are eligible to invest in the Fund and I am/we are not acquiring Participating Shares for or on behalf of, or for the benefit of, any person or entity who/which is not eligible to invest in the Fund nor do I/we intend transferring any Participating Shares which I/we may purchase to any person or entity who/which is not eligible to invest in the Fund. I/We confirm that I/we are aware of the risks involved in the proposed investment and of the fact that inherent in such investment is the potential to lose the entire sum invested.

8. I/We agree to notify the Company or the Administrator immediately if I/we become aware that any of the representations, declarations or warranties given by me/us in this Application Form is/are no longer accurate and complete in all respects and agree immediately to take such action as the Company may direct, including where appropriate, redemption of my/our entire holding.

9. I/We hereby declare that (i) the Participating Shares are not being acquired in violation of any applicable law or regulation in the jurisdiction in which I/we are resident or domiciled, (ii) I/we are fully informed as to the tax consequences of acquiring, owning and redeeming the Participating Shares in the jurisdiction in which I/we are resident or domiciled and (iii) the Participating Shares will not be owned beneficially by a person under 18 years of age.

10. I/We agree to indemnify and hold harmless the Company, the Manager, the Administrator, on its

own behalf and as agent of the Company, and their respective affiliates, directors, members, partners, shareholders, officers, employees and agents from and against any and all losses, liabilities, damages, penalties, costs, fees and expenses (including without limitation legal fees and disbursements) which may result, directly or indirectly, from (a) any acquisition by me/us of the Participating Shares in violation of any applicable law or regulation in the jurisdiction in which I/we are resident or domiciled and (b) any inaccuracy in or breach of any representation, warranty, covenant or agreement set forth in this section or in any document delivered by me/us to the Company or any of them and shall notify the Company immediately if any of the representations herein made are no longer accurate and complete in all respects.

11. I/We understand that the confirmations, representations, declarations, indemnities and warranties made or given herein are continuous and apply to all subsequent purchases of Participating Shares by me/us.

12. I/We acknowledge the right of the Company at any time to require the mandatory redemption of Participating Shares in the circumstances provided for in the Particulars.

13. I/We, if not a natural person, am/are duly organised, validly existing and in good standing under the laws of the jurisdiction in which I/we are organised and I/we have the power and authority to enter into and perform my/our obligations under this Application Form.

14. I am/we are able to bear the economic risk of an investment in the Participating Shares, including, without limitation, the risk of loss of all or a part of my/our investment. I/we do not have an overall commitment to investments which are not readily marketable that is disproportionate to my/our net worth, and my/our investment in the Participating Shares will not cause such overall commitment to be excessive.

15. I/We acknowledge that due to legislation aimed at combating money laundering in force in their jurisdiction, the Administrator will require proof of identity as described in the Particulars and as required pursuant to this Application Form before this application can be processed. I/We have read, understood and completed the provisions in this Application Form entitled "Anti-Money Laundering and Countering Terrorist Financing" and provided the required information and documentation to the Administrator.

16. I/We acknowledge that due to anti-money laundering requirements operating within Guernsey, the Administrator or the Company (as the case may be) may require further identification of the applicant(s) before the application can be processed and the Administrator, on its own behalf and as agent of the Company and the Company shall be held harmless and indemnified against any loss arising as a result of a failure to process the application, or a delay in processing any redemption requests, if such information requested by the Administrator or the Company has not been provided by me/us or has been provided in incomplete form.

17. I/We acknowledge that all statements and information provided in respect of this Application Form, are true, correct and complete as of the date hereof, and I/we agree to notify the Administrator as soon as reasonably practicable if I/we become aware that any representation, warranty or other information contained in this Application Form has become untrue at any time.

18. We hereby confirm that the shares registered in our company's name are held on behalf of our own company. If the shares are beneficially held on behalf of our clients we hereby confirm that the identification and verification of the identity of the underlying client(s), including any ultimate economic beneficiary(ies) of the shares, as well as the origin of the money invested in the fund have been obtained and archived in line with the AML-CTF obligations to which we are subject by our financial authority or by our group policy. We also confirm that none of the underlying client(s) / ultimate economic beneficiary(ies) related to the investment is named on a list of prohibited

countries, territories, entities and individuals maintained by the OFAC, the EU and our / mother company's Financial Supervision Authority.

19. I/We acknowledge that the Company or the Administrator reserves the right to delay or refuse to make any redemption payment or distribution to a Shareholder without notice if any of the Directors or the Administrator suspects or is advised that the payment of any redemption or distribution moneys to such Shareholder might result in a breach or violation of any applicable anti-money laundering or other laws or regulations by any person in any relevant jurisdiction, or such refusal is considered necessary or appropriate to ensure the compliance by the Company, its Directors or the Administrator with any such laws or regulations in any relevant jurisdiction. I/We hereby hold the Company and the Administrator harmless and indemnify them against any loss arising as a result of a failure to process the application if such information has been required and has not been provided by me/us.

20. I/We hereby accept such lesser number of Participating Shares, if any, than may be specified above in respect of which this application may be accepted.

21. If any of the foregoing representations, warranties or covenants ceases to be true or if the Company no longer reasonably believes that it has satisfactory evidence as to their truth, notwithstanding any other agreement to the contrary, the Company may be obligated to freeze my/our investment, either by prohibiting additional investments, investment may immediately be redeemed by the Company, and the Company may also be required to report such action and to disclose my/our identity to relevant authorities. In the event that the Company is required to take any of the foregoing actions, I/we understand and agree that I/we shall have no claim against the Company, the Manager, the Administrator, and their respective affiliates, directors, members, partners, shareholders, officers, employees and agents for any form of damages as a result of any of the aforementioned actions.

22. I/We hereby certify that the Participating Shares are not being acquired for the benefit of, directly or indirectly, any US Person (as defined in the Particulars and CFTC Rule 4.7) nor in violation of any applicable law, and that I/we will not, subject to the conditions set forth in the Particulars, sell or offer to sell or transfer Participating Shares in the United States or to or for the benefit of a US Person. In particular:

    a) I/we understand that the Company has not been and will not be registered under the United States Investment Company Act of 1940, as amended (the "1940 Act"), that the Participating Shares have not been registered and will not be registered under the United States Securities Act of 1933, as amended, and that the Participating Shares have not been qualified under the securities laws of any state of the United States and may not be offered, sold or transferred in the United States or to or for the benefit of, directly or indirectly, any US Person;

    b) I am not/none of us is a US Person; and

    c) I am not/none of us is/are acquiring the Participating Shares for the account or benefit, directly or indirectly, of any US Person or with a view to their offer, sale or transfer within the United States or to or for the account or benefit, directly or indirectly, of any US Person.

23. I/We will hold Participating Shares on behalf of a U.S. Taxpayer (as defined below):

    Yes ☐ No ☐ (please tick the appropriate box)

    If the “yes” box is ticked, then I/we understand the U.S. tax consequences of such an investment. I/We agree to provide the Company with such additional tax information as it may from time to time request.

"U.S. Taxpayer" is defined to include a U.S. citizen or resident alien of the United States (as defined for United States federal income tax purposes); any entity treated as a partnership or corporation for U.S. tax purposes that is created or organised in, or under the laws of, the United States or any state thereof (including the District of Colombia); any other partnership that is treated as a U.S. Taxpayer under U.S. Treasury Department regulations; any estate, the income of which is subject to U.S. income taxation regardless of source; and any trust over whose administration a court within the United States has primary supervision and all substantial decisions of which are under the control of one or more U.S. fiduciaries. Persons who have lost their U.S. citizenship and who live outside the United States may nonetheless, in some circumstances, be treated as U.S. Taxpayers. An investor may be a "U.S. Taxpayer" but not a "US Person". For example, an individual who is a U.S. citizen residing outside of the United States is not a "US Person" but is a "U.S. Taxpayer".

24. I/We declare that the entity hereby subscribing for Participating Shares is neither a Benefit Plan Investor nor investing on behalf of or with any assets of a Benefit Plan Investor as defined below. Benefit Plan Investors should contact the Company.

    "Benefit Plan Investor" is used as defined in U.S. Department of Labor ("DOL") Regulation § 2510.3101(f)(2), and includes (i) any employee benefit plan (as defined in Section 3(3) of the Employee Retirement Income Security Act of 1974, as amended ("ERISA")), whether or not such plan is subject to Title I of ERISA (which includes both U.S. and non-U.S. plans, plans of governmental entities as well as private employers, church plans, and certain assets held in connection with nonqualified deferred compensation plans); (ii) any plan described in Section 4975(e)(1) of the Internal Revenue Code of 1986, as amended, (the "Code") (which includes a trust described in Code Section 401(a)) which forms a part of a plan, which trust or plan is exempt from tax under Code Section 501(a), a plan described in Code Section 403(a), an individual retirement account described in Code Section 408 or 408A or an individual retirement annuity described in Code Section 408(b), a medical savings account described in Code Section 220(d) and an education savings account described in Code Section 530); and (iii) any entity whose underlying assets include plan assets by reason of a plan's investment in the entity (generally because 25 per cent. or more of a class of interests in the entity is owned by plans). Benefit Plan Investors also include that portion of any insurance company's general account assets that are considered "plan assets" and (except if the entity is an investment company registered under the 1940 Act) the assets of any insurance company separate account or bank common or collective trust in which plans invest.

25. If I am/we are a commodity pool, my/our investment is directed by an entity which (i) is not required to be registered in any capacity with the Commodity Futures Trading Commission ("CTFC") or to be a member of the National Futures Association ("NFA"), (ii) is exempt from registration or (iii) is duly registered with the CFTC in an appropriate capacity or capacities and is a member in good standing of the NFA.

26. Investment Company Representations:

    a) ☐ I am/We are neither an investment company required to be registered under the 1940 Act, nor an issuer that, but for an exception from the definition of "investment company" under the 1940 Act, would be an investment company,

    b) ☐ I am/We are an investment company subject to registration or would be an investment company but for an exception under the 1940 Act.

5.3 TAX INFORMATION AND DECLARATIONS

1. I/we agree to co-operate with the Manager and the Administrator in ensuring that the Manager, Administrator and the Company are able to comply with their obligations under FATCA, CRS (as

those terms are defined in the Particulars) or the requirements of any similar laws or regulations to which the Manager, the Administrator or the Company may be subject from time to time ("Similar Laws") and/or any intergovernmental agreement to which the Manager, the Administrator or the Company may be subject. In particular I/we:

a) agree to complete the Tax Information Exchange Self Certification Form at Schedule 1 hereto;

b) agree to provide the Manager and the Administrator with any information, representations, certificates, forms or documentation relating to me/us (or its direct or indirect beneficial owners) requested by them from time to time for the purposes of allowing them to consider any relevant issues arising under FATCA, CRS, Similar Laws and/or any applicable intergovernmental agreement and to comply with its and/or the Fund's obligations under FATCA, CRS, Similar Laws and/or any applicable intergovernmental agreement;

c) consent to allowing, and authorising, the Manager and the Administrator to disclose and supply any information, representations, certificates, forms or documentation in relation to it (or its direct or indirect beneficial owners) to any relevant governmental authority of any jurisdiction to the extent required under FATCA, CRS, Similar Laws and/or any applicable intergovernmental agreement (and to the extent relevant, it shall procure that its direct or indirect beneficial owners provide such consent and authorisation to the Manager and the Administrator in respect of any such information, representations, certificates, forms or documentation relating to it);

d) shall notify the Manager and the Administrator of any material changes which affect its status (and to the extent relevant, the status of its direct or indirect beneficial owners) under FATCA, CRS, Similar Laws and/or any applicable intergovernmental agreement or which result in any information, representations, certificates, forms or documentation previously provided to the Manager and the Administrator becoming inaccurate or incomplete within the earlier of 90 days of becoming aware of such changes and any other timeline provided under FATCA, CRS, Similar Laws and/or any applicable intergovernmental agreement for such an event; and

e) shall, to the extent there have been material changes as described above, promptly provide the Manager and the Administrator with updated information, representations, certificates, forms or documentation as applicable.

2. To the extent that monies received by the Company become subject to a deduction or withholding relating to FATCA, CRS, Similar Laws and/or any applicable intergovernmental agreement, I/We agree that:

a) neither the Manager, the Administrator nor the Company shall be required to compensate, indemnify or in any way make my/our loss in respect of such deduction or withholding and therefore (without limitation): (i) neither the Manager, the Administrator nor the Company shall be required to increase any payment or distribution to me/us where the purpose of the increase is to reflect any amount deducted or withheld and (ii) any monies paid or distributed to me/us by either the Manager, the Administrator or the Company shall be paid net of the amount deducted or withheld; and

b) I/we shall have no recourse to the Company in respect of a credit or refund from any person relating to the amount so deducted or withheld.

5.4 DATA PROTECTION

I/We acknowledge that for the purposes of this Application Form:

1. By submitting the personal data to the Administrator (acting for and on behalf of the Company) in the case of an Applicant, where (a) the Applicant is a natural person or (b) where the Applicant is not a natural person, he/she/it (as the case may be) represents and warrants that he/she/it (as applicable):

    a) has read and understood the terms of the Privacy Notice as set out in Appendix 1 to the Particulars; and/or

    b) has brought the Privacy Notice to the attention of any underlying Data Subjects on whose behalf or account the Applicant may act or whose Personal Information will be disclosed to the Company as a result of the Applicant entering into this Application Form; and

    c) the Applicant has complied in all other respects with Data Protection Laws in respect of disclosure and provision of personal data to the Company.

2. Where the Applicant acts for or on account of an underlying Data Subject, he/she/it shall, in respect of the personal data it processes in relation to or arising out of this Application Form:

    a) comply with all applicable Data Protection Laws;

    b) take appropriate technical and organizational measures against unauthorized or unlawful processing of the personal data and against accidental loss or destruction of, or damage to the personal data;

    c) if required, agree with the Company, the Manager and the Administrator, the responsibilities of each such entity as regards relevant data subjects' rights and notice requirements; and

    d) immediately on demand, fully indemnify the Company, the Manager and/or the Administrator and keep them fully and effectively indemnified against all costs, demands, claims, expenses (including legal costs and disbursements on a full indemnity basis), losses (including indirect losses and loss of profits, business and reputation), actions, proceedings and liabilities of whatsoever nature arising from or incurred by the Company, the Manager and/or the Administrator in connection with any failure by the Applicant to comply with the provisions of this paragraph 2.

5.5 FACSIMILE AND ELECTRONIC MEANS INSTRUCTIONS

I/We hereby confirm that the Company, the Manager and the Administrator are each authorised and instructed to accept and execute any instructions in respect of the Funds to which this application relates given by me/us by facsimile, email or other electronic means. The Company, the Manager and the Administrator may rely conclusively upon and shall incur no liability in respect of any action taken upon any notice, consent, request, instruction, or other instrument believed, in good faith, to be genuine or to be signed by properly authorised persons.

5.6 COMPLAINTS

It is CAM Global Limited's policy to ensure that steps are taken promptly to respond to all complaints. CAM Global Limited has a complaints resolution procedure in place in order to facilitate this. Any complaint involving CAM Global Limited or the funds should be set out in writing and include all relevant information. All relevant documents should be attached. The complaint should then be sent by e-mail or regular post to the Operations Manager of CAM Global Limited, or may be addressed to the Compliance Officer in Guernsey using the contact details set out below. The foregoing does not affect the investor's rights to make a complaint directly to the Guernsey Financial Services Commission.

Contact Person:	Compliance Officer
Post and Physical Address:	CAM Global Ltd No 1 Upper Ground Floor Royal Terrace, Royal Avenue St Peter Port, Guernsey GY1 2HL
Telephone Number:	+44 1481 758600
Email Address:	compliance@camglobal.gg

Postal and Physical Address:	CAM Global Ltd No 1 Upper Ground Floor Royal Terrace, Royal Avenue St Peter Port, Guernsey GY1 2HL
Telephone Number:	+44 1481 758600

Complaints may also be made to**:**

South Africa:	Compliance Officer (Representative Office)
Physical Address:	CAM Manco (RF) Proprietary Limited The Citadel, 15 Cavendish Street, (Corner of Cavendish and Warwick Streets) Claremont, Cape Town, 7700
Postal Address:	PO Box 23388 Claremont Cape Town, 7735
Email Address	PhilipB@cam.co.za

5.7 EMAIL COMMUNICATIONS

Acknowledgement regarding the email / use of internet / telephone recordings

I/we confirm in connection with the services provided by the Manager (including its delegates and agents) to the Company that we have requested any of the Manager (including its delegates and agents) and/or the Administrator to forward reports and information to us and/or to our authorised agents.

I/we recognise in giving these instructions to the Administrator that the internet is not a secure, confidential or prompt means of communication and agree that the Administrator, the Company and the Manager bear absolutely no responsibility or liability whatever for any errors and omissions, or

direct, indirect or consequential losses or damages arising in any way from the use of the internet, including, but not limited to, losses or damages resulting from the Administrator e-mailing reports and information to me/us or my/our authorised agents via the internet, or arising from viruses or worms, or the interception, tampering or breach of confidentiality of data or information transmitted which is not encrypted and authenticated in accordance with the Administrator's encryption standards.

We also agree that this letter of authority shall be binding on me/us and that I/we shall not make any claim or take any action or proceedings against the Administrator, the Company or the Manager for any losses or damages whatsoever suffered by reason of the Administrator accepting and acting upon this letter of authority.

I/We acknowledge and agree that in the event that I/we communicate with the Company, the Manager and/or the Administrator using e-mail or by other electronic means, then such party may monitor all e-mail or other electronic traffic to gather information for the purposes of security, marketing, statistical analysis and systems development. I/We acknowledge and agree that each of the Company, the Manager and the Administrator may record the contents of telephone conversations or monitor telephone calls and any such recordings shall remain the property of such party, and may be used by them in the event of a dispute.

5.8 DISCLOSURE

Collective investments are generally medium-to-long-term investments. The value of units/shares may fluctuate and past performance is not necessarily a guide to the future. Collective investments are traded at ruling prices. Collective investment prices are calculated on a net asset value basis, which is the total value of all assets in the portfolio including any income accrual and less any permissible deductions from the portfolio. A schedule of fees and charges and maximum commissions is available from the distributor. Commissions and incentives may be paid and if so, would be included in the overall costs.

5.9 DISCLAIMER

All actual and potential Conflicts of Interest are managed, reported and disclosed in line with the Managers Conflicts of Interest Policy which is available on request.

5.10 SIGNATURE(S) ON BEHALF OF THE APPLICANT

Name:		**Position Held:**	
Signature:		**Date:** (dd/mm/yyyy)	

Name:		**Position Held:**	
Signature:		**Date:** (dd/mm/yyyy)	

SECTION 6: INVESTOR AML DUE DILIGENCE DOCUMENTATION REQUIREMENTS

6.1DOCUMENTATION REQUIREMENTS

Please read this section carefully and provide all the documentation that is requested. This documentation is required to meet local regulations and if any of it is incomplete or missing, it may not be possible to provide services or establish a business relationship with you. "Certified copies" of documents, must be certified in English, by either:

- a director, officer, or manager of a regulated financial services business in a jurisdiction with equivalent anti-money laundering legislation to the Channel Islands*;
- an embassy, consulate or high commission of the country of issue of documentary evidence of identity.

A person certifying a copy of a passport should clearly declare in writing that it is **"Certified as a true copy and the photograph is a true likeness of the individual"**.

For all other document the certification should read **"I hereby certify this to be a true copy of the original document that I have seen"**.

A person certifying a copy of a document should print their full name, then sign and date the declaration and an official stamp should be applied where relevant. Certification should include the professional capacity in which the person is certifying and full contact details of the certifier must be provided. All pages containing information, including the photograph page of any identity document, must be copied and certified in this way. The information should be clearly legible and if necessary translated into English.

The Company or the Administrator reserve the right to request any other additional information or documentation if necessary, when first applying to invest in the Company or anytime during the period of investment.

* If the certification is obtained from a jurisdiction that does not have equivalent anti-money laundering legislation to that of Guernsey, alternative references and verification may be required. If you are in any doubt, please contact the Administrator.

6.2 DOCUMENTS RELATING TO THE APPLICANT

Individual Applicant(s)

Please tick beside each required document to confirm that you have enclosed the document.

☐ A certified copy of valid Passport or other government issued Identity Card that has a photo and a signature

☐ An original (or certified copy) of a recent Utility Bill (or Bank Statement) showing proof of current residential address. The Utility Bill (or Bank Statement) must have been issued within the last three (3) months. Please note that PO Box numbers are not acceptable.

Corporate Trustee - a 'Trust Company' domiciled in a FATF / Regulated Jurisdiction

Please tick beside each required document to confirm that you have enclosed the document.

☐ Either (a) information about the regulatory body and laws under which the Trust Company is

authorised / licensed / regulated (e.g. details of the national regulator's website from which confirmation of the Trust Company's regulatory status can be found) or (b) a certified copy of the Trust Company's licence or authorisation

☐ A List of Authorised Signatories showing names, specimen signatures and signing powers

☐ A group structure chart

☐ Certified true copy of the latest audited accounts

☐ A certified true copy of the register of directors

☐ Details of all Shareholders owning 25% or more of the Trust Company

☐ A certified true copy of duly authorised and relevant pages of the Trust Deed

☐ A certified copy of identification documents of the trustees, settlers, protectors and ultimate economic beneficiaries

Financial Services Business ('FSB') domiciled in a FATF / Regulated Jurisdiction

Please tick beside each required document to confirm that you have enclosed the document.

☐ Either (a) information about the regulatory body and laws under which the FSB is authorised / licensed / regulated (e.g. details of the national regulator's website from which confirmation of the FSB's regulatory status can be found) or (b) a certified copy of the FSB's licence or authorisation

☐ A List of Authorised Signatories showing names, specimen signatures and signing powers

☐ A group structure chart

☐ Certified true copy of the latest audited accounts

☐ A certified true copy of the register of directors

☐ Details of all Shareholders owning 25% or more of the Trust Company

☐ Details of all Shareholders owning 25% or more of the financial services business

Private Companies (Companies who issue Bearer Shares are excluded from investing in the Company)

Please tick beside each required document to confirm that you have enclosed the document.

☐ A List of Authorised Signatories showing names, specimen signatures and signing powers

☐ A certified true copy of the Certificate of Incorporation

☐ A certified true copy of the Memorandum and Articles of Association

☐ A certified true copy of each signatory's passport

☐ A certified true copy of a current utility bill (or bank statement) for each signatory showing

proof of residential address. The Utility Bill (or Bank Statement) must have been issued within the last three (3) months. Please note that PO Box numbers are not acceptable.

☐ Details of the Beneficial Owner(s)

☐ Certified true copy of passports for all Beneficial Owner(s)

☐ A certified true copy of utility bill or bank statement for all Beneficial Owner(s)

☐ A certified true copy of the register of directors

☐ Certified true copy of passport for all Directors

☐ A certified true copy of the register of Shareholders

☐ Certified true copy of passport for all Shareholders owning 25% or more of the Company

☐ A certified true copy of utility bill or bank statement for all Shareholders owning 25% or more of the Company. Please note the utility bill or bank statement must show the full residential address, PO Box Numbers are not acceptable

Partnerships

Please tick beside each required document to confirm that you have enclosed the document.

☐ A certified true copy of the Partnership Agreement

☐ A List of Authorised Signatories showing names, specimen signatures and signing powers

☐ A certified true copy of each signatory's passport

☐ A certified true copy of certificate of registration

☐ Full list of current partners;

☐ Certified true copy of passports for all Partners with a 25% share or more who exercise authority or control

☐ A certified true copy of a current utility bill or bank statement for each signatory. Please note the utility bill or bank statement must show the full residential address, PO Box Numbers are not acceptable

SECTION 7: TAX INFORMATION EXCHANGE SELF CERTIFICATION FORMS

The attached forms **"CRS-I" (for individuals)** and **"CRS-E" (for entities)** are required to enable the Company and the Administrator to comply with their obligations under the US Foreign Account Tax Compliance Act ("FATCA"), the Intergovernmental Agreement ("IGA") entered into between Guernsey and the US, any future tax information exchange agreements which may be entered into between Guernsey and other jurisdictions in future and the Common Reporting Standard ("CRS").

Reporting, if required under the relevant agreement, will be made to the relevant tax authority via our local tax authorities or in such manner as set out in the IGA or the CRS.

All fields in the CRS-I and CRS-E form are required to be completed in order for the Company and the Administrator to fulfil its obligations under the IGA and/or the CRS.

Individual (Controlling Persons) Self-Certification for FATCA and CRS

Instructions for completion

We are obliged under the applicable regulations of the local jurisdiction where the fund is domiciled with respect to the Foreign Account Tax Compliant Act ("FATCA") and Common Reporting Standards ("CRS"), to collect certain information about each Account Holder's tax arrangements. Please complete the sections below as directed and provide any additional information that is requested. Please note that in certain circumstances, we may be legally obliged to share this information and other financial information with respect to an Account Holder's interests in the Fund with relevant tax authorities.

If you have any questions about this form or defining the Account Holders tax residency status, please consult your tax adviser or local tax authority.

For further information on FATCA, please refer to the following links:

https://www.treasury.gov/resource-centre/tax-policy/treaties/Pages/FATCA.aspx and
https://www.irs.gov/Businesses/Corporations/FATCAFAQs

For further information on CRS, please refer to the following link http://www.oecd/org/tax/automatic-exchange/

If any of the information below about the investors tax residence or FATCA/CRS classification changes in the future, please advise the recipient promptly of these changes.

Please note that where there are joint or multiple Account Holders, each individual is required to complete a separate Individual (Controlling Persons) Self-Certification for FATCA and CRS form.

Also note that the term Account Holder(s) and Controlling Person(s) are used interchangeably as applicable in this form.

Sections 1, 2, 3 and 5 must be completed by all Account Holders.

Section 4 should only be completed by any individual who is a Controlling Person of an entity Account Holder which is a Passive Nonfinancial Entity or an Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution. (Mandatory fields are marked with an *)

Section 1: Account Holder Identification *

Account Holder Name*: _____

Place of Birth*:

Town or City of Birth*: _____ Country of Birth*: _____
(Do not abbreviate)

Date of Birth (dd/mm/yyyy)*: _____

Current Residential Address*:

Number: _____

Street: _____

City, Town, State, Province or County:
_____

Postal/ZIP Code: _____ Country: _____
(Do not abbreviate)

Mailing address (if different from above):

Number: _____

Street: _____

City, Town, State, Province or County:

_____

Postal/ZIP Code: _____ Country: _____
(Do not abbreviate)

Section 2: FATCA Declaration U.S. Citizenship or U.S. Residence for Tax purposes*

Please tick either (a) or (b) and complete as appropriate.

(a) I confirm that [I am]/[the account holder is] is a U.S. citizen and/or resident in the U.S. for tax purposes ☐ OR

(b) I confirm that [I am not]/[the account holder is not] a U.S. citizen or resident in the U.S. for tax purposes ☐

Section 3: CRS Declaration of Tax Residency (Note: you may have more than one tax residency)*

Please indicate your/the Account Holder's country/jurisdiction of tax residence. If resident in more than one country/jurisdiction, please detail all countries/jurisdictions of tax residence and associated taxpayer identification number or equivalent number ('TIN') for each country/jurisdiction indicated. Please refer to the OECD CRS Portal for more information on Tax Residency.

If a TIN is unavailable, please provide the appropriate reason A, B or C where indicated below:

Reason A – The country/jurisdiction where the Account Holder is resident does not issue TIN's to its residents
Reason B – The Account Holder is otherwise unable to obtain a TIN (Please explain why you are unable to obtain a TIN in the below table if you have selected this reason)
Reason C – No TIN is required. (Note: Only select this reason if the domestic law of the relevant country/jurisdiction does not require the collection of the TIN issued by such country/jurisdiction)

	Country of Tax Residency (Do not abbreviate)	TIN	If no TIN available enter Reason A, B or C
1			
2			
3			

Please explain in the following boxes why you are unable to obtain a TIN if you selected Reason B above.

1	
2	
3	

Section 4: CRS Type of Controlling Person

(ONLY to be completed by any individual who is a Controlling Person of an entity which is a Passive Non-Financial Entity or an Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution)

For joint or multiple Controlling Persons please complete a separate Individual (Controlling Person's) Self Certification for FATCA and CRS form for each Controlling Person.

Please provide the type of Controlling Person as applicable under CRS by ticking the appropriate box(es).	Please Tick	Entity Account Holder Name
Controlling Person of a legal person – control by ownership		
Controlling Person of a legal person – control by other means		
Controlling Person of a legal person – senior managing official		
Controlling Person of a trust – settlor		
Controlling Person of a trust – trustee		
Controlling Person of a trust – protector		
Controlling Person of a trust – beneficiary		
Controlling Person of a trust- other		
Controlling Person of a legal arrangement (non-trust) – settlor – equivalent		
Controlling Person of a legal arrangement (non-trust) – trustee – equivalent		
Controlling Person of a legal arrangement (non-trust) – protector – equivalent		
Controlling Person of a legal arrangement (non-trust) – beneficiary – equivalent		
Controlling Person of a legal arrangement (non-trust) – other – equivalent		

Section 5: Declarations and Undertakings*

I declare that the information provided in this form is, to the best of my knowledge and belief, accurate and complete.

I acknowledge that the information contained in this form and all information regarding the Account Holder and any Reportable Account(s) may be provided to the tax authorities of the country/jurisdiction in which this account(s) is/are maintained and exchanged with tax authorities of another country/jurisdiction or countries/jurisdictions in which the Account Holder may be tax resident pursuant to intergovernmental agreements to exchange financial account information.

I undertake to advise the recipient promptly and provide an updated Self-Certification within 30 days where any change in circumstance occurs which causes any of the information contained in this form to be incorrect.

Authorised Signature*: _____

Print Name(s)*: _____

Date: (dd/mm/yyyy):* _____

Note: If you are not the Account Holder please indicate the capacity in which you are signing the form. If signing under a power of attorney please also attach a certified copy of the power of attorney.

Capacity *: _____

Entity Self-Certification for FATCA and CRS

Instructions for completion

*We are obligated under the applicable regulations of the local jurisdiction where the Fund is domiciled with respect to the Foreign Account Tax Compliant Act ("**FATCA**") and Common Reporting Standards ("**CRS**"), to collect certain information about each Account Holder's tax arrangements. Please complete the sections below as directed and provide any additional information that is requested. Please note that in certain circumstances, we may be legally obliged to share this information and other financial information with respect to an Account Holder's interests in the Fund with relevant tax authorities.*

If you have any questions about this form or defining the Account Holder's tax residency status, please consult your tax advisor or local tax authority.

For further information on FATCA please refer to the following links:

https://www.treasury.gov/resource-centre/tax-policy/treaties/Pages/FATCA.aspx and
https://www.irs.gov/Businesses/Corporations/FATCAFAQs

For further information on CRS, please refer to the following link http://www.oecd.org/tax/automatic-exchange/

If any of the information below about the Account Holder's tax residence or FATCA/CRS classification changes in the future, please advise the recipient promptly of these changes.

Account holders that are individuals should not complete this form and should complete the Individual Self-Certification form for FATCA and CRS.

(Mandatory fields are marked with an *)

Section 1: Account Holder Identification *

Account Holder's Name*: _____ (the "**Entity**")

Country of Incorporation or Organisation: _____
(Do not abbreviate)

Current Registered Address*:

Number: _____

Street: _____

City, Town, State, Province or County: _____

Postal/ZIP Code: _____ Country: _____
(Do not abbreviate)

Mailing address (if different from above):

Number: _____

Street: _____

City, Town, State, Province or County: _____

Postal/ZIP Code: _____ Country: _____
(Do not abbreviate)

Section 2: Declaration U.K. Person

(This section only applies to the Account Holder of an account **opened before July 1, 2016** and **maintained** in any of the crown dependencies and overseas territories ("CDOT") that have entered into automatic tax information exchange agreements with the U.K. [2])

Please tick either (a), (b) or (c) below and complete as appropriate.

(a) The Entity is a Specified U.K. Person ☐

Or

(b) The Entity is a U.K. Person but not a specified U.K. Person ☐

Please indicate exemption[3]_____

Or

(c) The Entity is **not** a *U.K.Person* ☐

Section 3: FATCA Declaration U.S. Person*

Please tick either (a), (b) or (c) below and complete as appropriate.

(a) The Entity is a Specified U.S. Person **(Skip Section 4 and Complete Sections 5, 6, 7 (if applicable) & 8)**

☐

Or

(b) The Entity is a U.S. Person but **not** a *Specified U.S. Person* **(Skip Section 4 and Complete Sections 5, 6, 7 (if applicable) & 8)** ☐

Please indicate exemption

[4]_____ **Or**

[2] For the complete list of CDOT jurisdictions, please refer to this link: https://www.gov.uk/government/publications/automatic-exchange-of-information-agreements-other-uk-agreements

[3] Under the U.K. IGA, Specified U.K. Person does not include: A corporation the stock of which is regularly traded on one or more established securities markets or a member of the same EAG; A depositary institution; A broker or dealer in securities, commodities, or derivative financial instruments that is registered as such under the laws of the United Kingdom; or a Non-Reportable United Kingdom Entity as defined in Annex II paragraph V.

[4] Under U.S. IGA and in the U.S. Internal Revenue Code, Specified U.S. Person does not include: An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37); The United States or any of its agencies or instrumentalities; A state, the District of Columbia, a possession of the United States, or any of their political subdivisions, or instrumentalities; A corporation the stock of which is regularly traded on one or more established securities markets, as described in Reg, section 1.1472-1(c)(1)(i); A corporation that is a member of the same expanded affiliated group as a corporation described in Reg. section 1.1472-1(c)(1)(i); A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards and options) that is registered as such under the laws of the United States or any state; A real estate investment trust; A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940; A common trust fund as defined in section 584(a); A bank as defined in section 581; A broker; A trust exempt from tax under section 664 or described in section 4947; or A tax-exempt trust under section 403(b) plan or section 457(g) plan.

(c) The Entity is **not** a U.S. Person **(Complete Sections 4,5,6,7 (if applicable) & 8)** ☐

Section 4: Entity's FATCA Classification.

(If you ticked section 3(c) above, please tick one applicable category below and complete as appropriate)

The information provided in this section is for FATCA. Please note your classification may differ from your CRS classification in Section 6 below.

4.1 Financial Institutions under FATCA:

If the Entity is a *Financial Institution*, please tick one of the below categories and provide the Entity's GIIN

I.	*Partner Jurisdiction Financial Institution*	
II.	*Registered Deemed Compliant Foreign Financial Institution*	
III.	*Participating Foreign Financial Institution*	

Please provide the Entity's Global Intermediary Identification number (GIIN) _____

4.2 If the Entity is a *Financial Institution* but unable to provide a *GIIN*, please tick one of the below reasons:

I.	*The Entity has not yet obtained a GIIN but is sponsored by a another entity which does have a GIIN. Please provide the sponsor's name and sponsor's GIIN:* *Sponsor's Name:*_____ *Sponsor's GIIN:*_____	
II.	*The Entity is a Trustee Documented Trust.* *Please provide your Trustees name and GIIN.* *Trustee's Name:*_____ *Trustee's GIIN*_____	
III.	*The Entity is a Financial Institution and has not yet obtained a GIIN but intends to do so, if required.*	
IV.	*Exempt Beneficial Owner*	
V.	*The Entity is a Certified Deemed Compliant, or otherwise Non-Reporting, Foreign Financial Institution (including a Foreign Financial Institution deemed compliant under Annex II of an IGA, except for a Trustee Documented Trust or Sponsored Financial Institution)* *Indicate exemption*_____	
VI.	*Excepted Foreign Financial Institution* *Indicate exemption*_____	
VII.	*Non-Participating Foreign Financial Institution*	

4.3 Non-Financial Institutions under FATCA:

If the Entity is not a Financial Institution, please tick one of the below categories

I.	*Active Non-Financial Foreign Entity*	
II.	*Passive Non-Financial Foreign Entity* (If this box is ticked, please indicate the name of any natural Controlling Person(s) of the Entity in **Section 7** below and complete a separate individual self-certification form for each of your Controlling Persons)	
III.	*Excepted Non-Financial Foreign Entity*	

Section 5: CRS Declaration of Tax Residency (Note: Entities may have more than one tax residency)*

Please indicate the Entity's country/jurisdiction of tax residence for CRS purposes. If resident in more than one country/jurisdiction please detail all countries/jurisdictions of tax residence and associated tax identification number or equivalent number ("TIN") for each country/jurisdiction indicated. Please refer to the OECD CRS Portal for more information on Tax Residency.

If a TIN is unavailable, please provide the appropriate reason **A, B** or **C where indicated below:**

Reason A – The country/jurisdiction where the Account Holder is resident does not issue TINs to its residents
Reason B – The Account Holder is otherwise unable to obtain a TIN *(Please explain why you are unable to obtain a TIN in the below table if you have selected this reason)*
Reason C – No TIN is required. (Note: Only select this reason if the domestic law of the relevant country/jurisdiction does not require the collection of the TIN issued by such country/jurisdiction)

If the Entity is not tax resident in any country/jurisdiction (e.g., because it is fiscally transparent), please indicate that below and provide its place of effective management or country/jurisdiction in which its principal office is located.

	Country/Jurisdiction of Tax Residency (Do not abbreviate)	**TIN**	**If no TIN available enter Reason A, B or C**
1			
2			
3			

*Please explain in the following boxes why you are unable to obtain a TIN if you selected **Reason B** above.*

1	
2	
3	

Section 6: Entity's CRS Classification*

The information provided in this section is for CRS. Please note an Entity's CRS classification may differ from its FATCA classification in Section 4 above. Please refer to the OECD CRS Portal for more information on Tax Residency.

6.1 Financial Institutions under CRS:

If the Entity is a *Financial Institution*, please tick one of the below categories

I.	An *Investment Entity* located in a *Non-Participating Jurisdiction* and managed by another *Financial Institution* (If this box is ticked, please indicate the name of any natural Controlling Person(s) of the Entity in **Section 7** below and complete a separate individual self-certification forms for each of your Controlling Persons)	
II.	*Financial Institution under CRS (other than (I) above)*	

6.2 Non-Financial Institutions under CRS:

If the Entity is a *Non-Financial Institution*, please tick one of the below categories

I.	Active *Non-Financial Entity* – a corporation the stock of which is regularly traded on an established securities market *Please provide the name of the established securities market on which the corporation is regularly traded:*_____	

II.	Active *Non-Financial Entity* – if you are the Related Entity of a regularly traded corporation *Please provide the name of the regularly traded corporation that the Entity is a Related Entity of:*_____	
III.	Active *Non-Financial Entity* – a Government Entity or Central Bank	
IV.	Active *Non-Financial Entity* – an International Organisation	
V.	Active *Non-Financial Entity* – other than 6.2.I – 6.2.IV	
VI.	*Passive Non-Financial Entity* (If this box is ticked, please indicate the name of any natural Controlling Person(s) of the Entity in **Section 7** below and complete a separate individual self-certification form for each of your Controlling Persons).	

Section 7: Name of any Controlling Person(s) of the Account Holder:

If you have ticked 4.3.II, 6.1.I or 6.2.VI above please complete as appropriate.

7.1 Indicate the name of any Controlling Person(s) of the Account Holder:

I.	
II.	
III.	
IV	
V.	

7.2 Complete a separate Individual (Controlling Person's) Self-Certification for FATCA and CRS for each Controlling Person.

Note: If there are no natural person(s) who exercise control of the Entity, then the Controlling Person will be the natural person(s) who hold the position of senior managing official of the Entity.

Section 8: Declarations and Undertakings*

I/We declare on behalf of the Entity that the information provided in this form is, to the best of my/our knowledge and belief, accurate and complete.

I/We acknowledge on behalf of the Entity that the information contained in this form and all information regarding the Account Holder and any Reportable Account(s) may be reported to the tax authorities of the country/jurisdiction in which this account(s) is/are maintained and exchanged with tax authorities of another country or country/jurisdiction or countries/jurisdictions in which the Account Holder may be tax resident pursuant to intergovernmental agreements to exchange financial account information.

I/We on behalf of the Entity undertake to advise the recipient promptly and provide an updated Self-Certification form within 30 days where any change in circumstance occurs which causes any of the information contained in this form to be incorrect.

Authorised Signature*: _____

Print Name(s)*: _____

Capacity in which declaration is made*: _____

Date: (dd/mm/yyyy):* _____

Authorised Signature: _____

Print Name: _____

Capacity in which declaration is made: _____

Date: (dd/mm/yyyy): _____

SECTION 8: APPENDICES

APPENDIX 1 – DEALING PROCEDURE

All dealing instructions in relation to the Shares in the Funds must be received before the time(s) specified in the Fund's Core Particulars and/or relevant Sub-Fund Supplemental Particulars as the case may be, together, the "Particulars". Dealing Instructions received after such times will generally be deemed to have been received for the next relevant dealing day.

No redemption payment may be made until the original Account Opening Form has been received and the Administrator is satisfied that all necessary anti-money laundering checks have been completed in full.

If you (hereinafter referred to as the "Investor") wish to send Northern Trust International Fund Administration Services (Guernsey) Limited (the "Administrator"), instructions in respect of the Shares of Fund (the "Fund") in portable document format ("PDF") or commonly used equivalent scanned form which is transmitted to the Administrator via email, then the terms as set out below will apply to the Investor's account.

By completing the appropriate documentation (e.g. original subscription forms, additional subscription forms, transfer/switch requests or redemption forms) and instructing the Administrator in respect of the Shares of the Fund via email, the Investor will have accepted the following Terms and Conditions of Service.

A. Procedure for PDF Instructions

1. The email address to submit PDF instructions camglobaltainstructions@ntrs.com This address is to be solely used for sending PDF instructions via email in respect of the shares in the Fund.

2. The Investor shall ensure that the PDF instruction is signed by properly authorised persons, scanned and attached to a blank email which is addressed to camglobaltainstructions@ntrs.com.

3. Please ensure that the Investor blank e-mail does not contain any text or non-text items including but not limited to logos.

4. Each blank e-mail sent to the email address specified above may only include one PDF file attachment. However, the single PDF file attachment may contain multiple instructions in relation to Shares in more than one Sub-Fund. A blank e-mail with multiple PDF attachments will be rejected by the Administrator.

5. PDF instructions received without the scanned PDF form attached will not be accepted.

6. Upon receipt of an email with the scanned PDF instruction, the Administrator will send the Investor a task number by auto-response.

    a. The task number acknowledges receipt of the Investor's instruction.

    b. The task number is not confirmation of placement of the instruction.

    c. The Administrator must be in receipt of the instruction prior to the relevant dealing deadline as set out in the Fund's Particulars. The Administrator will not be responsible for any delays in receipt.

d. If the Investor does not receive a task number by auto response, it is the Investor's responsibility to contact the Administrator by telephone (details confirmed within the application form) to confirm that the Administrator has received the Investor's instruction.

7. If the Investor sends the Administrator a PDF dealing instruction in respect of the shares in the Fund to a mailbox other than specified above, the Administrator will reject the instruction and/or the deal will not be placed. Notification of rejection may not be given prior to the dealing cut off.

8. In cases where the Investor has supplied the Administrator with a "group" email address, the Administrator will have fully discharged its responsibilities where it has sent any communication to this "group" address.

9. The Investor should not send a duplicate instruction by alternative means to the Administrator as this could lead to a duplicate e.g. deals being placed in error.

10. The Investor is not obliged to instruct in this manner.

B. General Terms and Conditions of Service:

1. Email is not a secure form of communication and may be subject to interception, interruption, corruption, distortion, non-delivery, loss, may not be confidential, secure or error free and may contain viruses. Using and relying on email involves increased risk of fraud and of miscommunications including those due to a telecommunications system or equipment failure, misdirected communications or illegibility of the instructions or documents and the Investor will bear the risks if the Investor wishes to conduct the Investor's dealings using email.

2. The Administrator is authorised and instructed to accept and execute any instructions in respect of shares in the Fund given by the Investor in PDF form or by email. The Administrator will rely conclusively upon, and neither the Company nor the Administrator shall incur liability in respect of any action taken upon any instruction believed in good faith to be genuine.

3. Neither the Company nor the Administrator will be responsible or liable for the authenticity of instructions received from the Investor or any authorised person and may rely upon any instruction from any such person representing himself to be a duly authorised person reasonably believed by the Administrator to be genuine.

4. Neither the Company nor the Administrator will accept responsibility or liability of any nature whatsoever arising out of or in connection with instructions given by the Investor in PDF form or by email, including without limitation, the Investor's use of an incorrect email address, failure of the Investor's transmission, interception, alteration or corruption of the Investor's email transmission, non-receipt of the Investor's electronic instruction, failure of technical infrastructure, error, omission, interruption, deletion, defect, delay in operation or transmission, computer virus, communication line failure, or any allotment, switch or redemption or other action taken in good faith by the Administrator upon any electronic instruction. In addition, neither the Company nor the Administrator will be liable for any failure to act upon electronic instructions due to equipment failure or for any cause that is beyond the control of the Administrator.

Where payment is not received in due time the Participating Shares shall be forfeited and cancelled without prior notice to the investor at its own cost.

Minimum initial subscription amounts and management fees for each fund and share class are set out in the table below.

The Manager may waive the minimum subscription thresholds either generally, or on a case-by-case basis, in its sole discretion. Additional subscriptions may be made in any amount. **Fund**	**Minimum Initial Subscription**	**Management Fee**	**Initial Fee**
CAM GLOBAL BALANCED FUND			
Class R (USD)	USD10,000 or currency equivalent	1.15% p.a.	None
Class R (EUR hedged)	USD10,000 or currency equivalent	1.15% p.a.	None
Class R (GBP hedged)	USD10,000 or currency equivalent	1.15% p.a.	None
Class R (ZAR hedged)	USD10,000 or currency equivalent	1.15% p.a.	None
CAM GLOBAL ALTERNTIVE STRATEGIES FUND**			
Class R (USD)	USD60,000*	1.00% p.a.	None
Class R (ZAR hedged)	ZAR1,000,000	1.00% p.a.	None

*Provided such amount is not less than ZAR1,000,000

**Class R (USD) and Class R (ZAR hedged): Any combination, provided that the aggregate initial subscription in both classes of Participating Shares is ZAR1,000,000 or more (or its equivalent in US$).

APPENDIX 2 – PAYMENT DETAILS

CAM Global Balanced Fund

Payment Routing Instructions for US Dollars

The bank from which the foreign currency is obtained must transfer the funds according to the routing instructions set out below:

Beneficiary Bank:	The Northern Trust International Banking Corporation, New Jersey
Beneficiary Banks Account Details:	
Fedwire ABA:	026 001 122
CHIPS:	0112
Beneficiary Bank SWIFT code:	CNORUS33
Beneficiary account number:	125021-20010
Beneficiary account name:	NTIFASGL as Designated Manager of CAM Global Portfolios PCC Limited
Reference:	Please include Register account number and / or order number and name

Payment Routing Instructions for Rand

The bank from which the foreign currency is obtained must transfer the funds according to the routing instructions set out below:

Intermediary Bank:	Standard Bank, Johannesburg
Intermediary Bank SWIFT code:	SBZAZAJJ
Beneficiary Bank:	The Northern Trust International Banking Corporation, New Jersey
Beneficiary Banks Account Details:	
Account Number	7228490
Beneficiary Bank SWIFT code:	CNORUS33
Beneficiary account number:	619841-20019
Beneficiary account name:	NTIFASGL as Designated Manager of CAM Global Portfolios PCC Limited
Reference:	Please include Register account number and / or order number and name

Payment Routing Instructions for Sterling

The bank from which the foreign currency is obtained must transfer the funds according to the routing instructions set out below:

Intermediary Bank:	Barclays Bank, 1 Churchill Place, London E14 5HP
Intermediary Bank SWIFT code:	BARCGB22
Intermediary Bank Sort Code:	20-32-53
Beneficiary Bank:	The Northern Trust International Banking Corporation, New Jersey
Beneficiary Banks Account Details:	
Account Number	53529495
Beneficiary Bank SWIFT code:	CNORUS33
Beneficiary account number:	619858-20019
Beneficiary account name:	NTIFASGL as Designated Manager of CAM Global Portfolios PCC Limited
Reference:	Please include Register account number and / or order number and name

Payment Routing Instructions for Euros

The bank from which the foreign currency is obtained must transfer the funds according to the routing instructions set out below:

Intermediary Bank:	**Barclays Bank Plc**
Intermediary Bank SWIFT code:	BARCDEFF
Beneficiary Bank:	The Northern Trust International Banking Corporation
Beneficiary Banks Account Details	
Beneficiary Bank SWIFT code:	CNORUS33
Beneficiary Bank account number	0210472800
Beneficiary account name:	NTIFASGL as Designated Manager of CAM Global Portfolios PCC Limited
Beneficiary account number	619866 - 20019
Reference:	Please include Register account number and / or order number and name

CAM Global Alternative Strategies Fund

Payment Routing Instructions for US Dollars

The bank from which the foreign currency is obtained must transfer the funds according to the routing instructions set out below:

Beneficiary Bank:	The Northern Trust International Banking Corporation, New Jersey
Beneficiary Banks Account Details:	
Fedwire ABA:	026 001 122
CHIPS:	0112
Beneficiary Bank SWIFT code:	CNORUS33
Beneficiary account number:	300491-20010
Beneficiary account name:	NTIFASGL as Designated Manager of CAM Global Portfolios PCC Limited re CAM Global Alternative Strategies Fund
Reference:	Please include Register account number and / or order number and name

Payment Routing Instructions for Rand

The bank from which the foreign currency is obtained must transfer the funds according to the routing instructions set out below:

Intermediary Bank:	Standard Bank, Johannesburg
Intermediary Bank SWIFT code:	SBZAZAJJ
Beneficiary Bank:	The Northern Trust International Banking Corporation, New Jersey
Beneficiary Banks Account Details:	
Account Number	7228490
Beneficiary Bank SWIFT code:	CNORUS33
Beneficiary account number:	681494-20019
Beneficiary account name:	NTIFASGL as Designated Manager of CAM Global Portfolios PCC Limited re CAM Global Alternative Strategies Fund
Reference:	Please include Register account number and / or order number and name

APPENDIX 3 – SUBSCRIPTION FORM (COMPLETE ONLY UPON RECEIPT OF ACCOUNT NUMBER CONFIRMATION)

CAM GLOBAL PORTFOLIOS PCC LIMITED

I/We hereby apply to subscribe for Participating Shares at the Subscription Price ruling on the Subscription Day in respect of which this application is accepted on the terms and subject to the conditions set out in the

Particulars of CAM Global Portfolios PCC Limited (the "Company"), the Supplemental Particulars of the relevant Fund and the latest annual report and accounts of the Company.

This Subscription Form constitutes your agreement to subscribe for Shares in the Fund. Please note the administrator does not require the original of this document to be posted to them.

Please complete this form in blue or black ink using BLOCK CAPITALS:

CAM Global Portfolios PCC Limited C/o Northern Trust International Fund Administration Services (Guernsey) Limited PO Box 255, Trafalgar Court, Les Banques, St Peter Port, Guernsey, GY1 3QL

REGISTERED INFORMATION

Registered Account Name		
Account Number		
Your Company Contact	Name:	Phone No: E-Mail Address:

DEAL INSTRUCTIONS

FUND	**Amount Payable in words**	**Amount Payable in figures**
CAM GLOBAL BALANCED FUND		
Class R (USD)		
Class R (EUR hedged)		
Class R (GBP hedged)		
Class R (ZAR hedged)		
CAM GLOBAL ALTERNATIVE STRATEGIES FUND		
Class R (USD)		
Class R (ZAR hedged)		

ORIGINATING ACCOUNT DETAILS

A request to change bank account details MUST BE MADE IN WRITING TO THE ADMINSTRATOR AND MUST BE ACCOMPANIED BY A BANK statement or banker's reference

Bank Name			
Bank Address			
Sort Code		ABA	
Account Name			
Account Number			
Payment Reference			

Note: Any subscription proceeds paid in currencies other than the Base Currency of the relevant Sub-Fund or the designated currency of the relevant [Share/Unit] Class will be converted into that currency at prevailing exchange rates. This foreign exchange transaction will be arranged by the Administrator at the cost and risk of the relevant investor.

PLEASE NOTE:

- Monies must originate from the account of the investor.
- Failure to complete these details accurately and in accordance with the original signed Account Opening Form and forward monies within the relevant settlement time scale may result in the loss of good value and an interest claim from the Fund.
- I/We confirm that I/we have the authority to make this investment.
- I/We confirm that I/We have received and read the information contained in this form and confirm that a copy of the Fund's Particulars has been supplied to me/us in relation to this new Sub-Fund or Share Class. I/We confirm that I/We have read the Particulars. I/We also acknowledge and agree that the updated Particulars and fund fact sheets for each Share Class are available at the Manager's website at www.camglobal.gg and that I/we will read and review the most up-to-date version of the relevant documents prior to making any subsequent application for Shares in the Funds. I/We confirm that any future investments to any other Sub-Fund or Class of the Fund can also be transacted based on this confirmation.
- I/We hereby agree to indemnify and hold harmless the Administrator, on its own behalf and as agent for the Fund, and its directors, officers and employees against any loss, liability, cost or expense (including without limitation legal fees, taxes and penalties) which may result directly or indirectly, from any misrepresentation or breach of any warranty, condition, covenant or agreement set forth herein or in any document delivered by me/us to the Fund or the Administrator. The Administrator will not be responsible or liable for the authenticity of instructions received from me/us or any authorised person and may rely upon any instruction from any such person representing himself to be a duly authorised person reasonably believed by the Administrator to be genuine.

Authorised Signatories	Print Name
Signatory 1	
Signatory 2	

Signatory 3

Signatory 4

Date