

**PART 1****Subscription Form: Individuals**

**MANHATTAN DOLLAR YIELD FUND  
SUBSCRIPTION FORM  
Individuals**

How to Invest	
1. Once completed this form should be returned to: Manhattan Dollar Yield Fund Limited Ebene Heights, 1 <sup>st</sup> Floor, 32 Ebene Cybercity, Ebene, Mauritius	Phone: +230 404 7000 Fax: +230 467 7050 Or e-mailed to <a href="mailto:manhattandollaryield@africanalliance.com">manhattandollaryield@africanalliance.com</a>
2. Subscriptions will only be processed on receipt of this Subscription Form and the following supporting documentation.	
<input type="checkbox"/> AML documentation <input type="checkbox"/> Proof of deposit <input type="checkbox"/> Proof of banking details <input type="checkbox"/> Completed FATCA & CRS Declarations	

<b>For office use only</b>	Investor Number:
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Investor			
Title		Surname	
First Name(s)			<input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth		Nationality	
Identity Number			
Income Tax Number		Country of Residence for tax purposes	
Residential Address			
		Post Code	
Postal Address			
		Post Code	
Telephone (H)		Telephone (W)	
Cell		Fax	
Email Address			
Occupation			
Please specify your preferred method of receiving correspondence *		<input type="checkbox"/> E-mail	<input type="checkbox"/> Postal address

\*Where no selection is made correspondence will be sent to the e-mail address supplied above. If no email address is supplied, correspondence will be sent via post.

Investment Instruction			
Fund	Portfolio Number	New Portfolio <input checked="" type="checkbox"/>	Investment Amount
Manhattan Dollar Yield Fund			<b>Lump Sum</b> (minimum subscription: USD100 000)
<b>Source of Funds</b>		<b>Total</b>	USD
			(This amount must match Deposit slip/Copy of Fund Transfer)
<b>Income Distribution - mark with X</b>			
		Re-Invest <input type="checkbox"/>	Pay into bank account <input type="checkbox"/>
<small>Note: all income distributions will automatically be re-invested unless stated otherwise. This section only to be completed if this is the first investment made or if there must be a change.</small>			

Acting on behalf of Investor / Joint Investor			
Title		Surname	
First Name(s)			<input type="checkbox"/> Male <input type="checkbox"/> Female
Identity Number or Passport			
Income Tax Number		Country of Residence for tax purposes	
Telephone		Telephone (W)	
Cell		Fax	
Email Address			

Joint Signatory Authority	
Please indicate whether you require a joint signing authority by making an election below:	
<input type="checkbox"/>	We instruct Manhattan Dollar Yield Fund Limited ("the Fund") to only action instructions signed by all authorised signatories named above.
<input type="checkbox"/>	We instruct the Fund to action instructions signed by any of the authorised signatories and agree to terms (a) to (d) below.
(a)	We authorise the Fund to act upon the instructions given in writing and, signed or purportedly signed by any one of the authorised signatories.
(b)	We confirm that these authorisations shall apply to any further shares purchased, transferred or otherwise held.
(c)	We agree that this authorisation shall remain in force until notice signed by all the authorised signatories in writing of its termination or replacement is received by the Fund and any such notice shall be without prejudice to the completion of transactions already initiated by the Fund pursuant to the above terms.
(d)	It is the policy of the Fund to send monies to the same bank account from where it originated.

Source of Funds / Source of Wealth Invested
Please specify the source of funds / Source of Wealth (e.g. investment proceeds; sale of assets; etc.) The Fund reserves the right to request documentary proof e.g. income statement, bank statement.

Banking Details of Investor			
Name of Account Holder			
Name of the Bank			
Branch Name		Branch Code	
Account Number		Account Type	

Signature of Account Holder \_\_\_\_\_

- A cancelled cheque or bank statement must be attached as proof of banking details.
- The onus is on the investor to inform the Fund of any changes to the bank account details.
- No payments will be made into third party bank accounts or credit cards. (i.e. payments will only be made to the bank account in the name of the registered investor).

Authorisation and Declaration
1. I have read and fully understood all the pages of this Subscription Agreement and agree to the Terms and Conditions of this investment and I understand that this subscription Agreement and any further documents, read with the Constitution and PPM constitutes the entire agreement between the Fund and me.
2. I warrant that the information contained herein is true and correct and that where this Subscription Form is signed in a representative capacity, I have the necessary authority to do so and that this transaction is within my power.

Signed at \_\_\_\_\_ Date \_\_\_\_\_

Authorised Signatories			
1. Full Name		Capacity	
Signature of Authorised Signatory			