

INVESTMENT FUNDS ACT 2006
 CERTIFICATION FORM
 Section 7(3)

Notes:

A fund exempted under Section 7 of the Investment Funds Act (the "Act") must file a completed copy of this form with the Authority on or before 31 March each year. The appropriate annual fee (as prescribed under the Bermuda Monetary Authority Act 1969 – refer to the 'Fees and Penalties' section of the Authority's website, www.bma.bm) is due on or before 31 March. Please make cheques payable to the Bermuda Monetary Authority.

A) FULL NAME OF FUND			
B) ADDRESS OF REGISTERED OFFICE	C) BOOKS & RECORDS ACCESS		
	Please give particulars of the officer, trustee or representative resident in Bermuda having access to the books and records of the fund:		
D) SERVICE PROVIDERS – THE AUTHORITY MUST BE NOTIFIED OF ANY CHANGES			
ADMINISTRATOR			
AUDITOR			
CUSTODIAN or PRIME BROKER*			
INVESTMENT MANAGER			
REGISTRAR			
CUSTODIAN WAIVER GRANTED*			
<p><small>* Pursuant to Section 9 (1A) and 9 (1B) of the Act, the Authority may, on application by the fund, grant an exemption from Section 9(1)(c)(iii) if the Authority has been satisfied that appropriate arrangements are in place to safeguard the fund's property. If the fund has not appointed a custodian or prime broker then application must be made for the waiver or the fund will be in breach of the exemption criteria.</small></p>			
E) LIST NAMES OF FUND OPERATORS (DIRECTORS/TRUSTEES/GENERAL PARTNERS)			
Name	Country of Residence		
F) NET ASSET VALUE OF FUND			
Total net asset value as at 31 December prior to date of this notification			
Net asset value per share/unit as at 31 December prior to date of this notification			
Total dollar value of subscriptions for the year ended 31 December prior to date of this notification			
Total dollar value of redemptions as at 31 December prior to date of this notification			
G) PERSON AUTHORISED BY THE FUND TO FILE NOTICE OF CONTINUING QUALIFICATION FOR EXEMPTION			
<p>I, the undersigned, hereby file notice that the fund continues to meet the criteria for exemption set out in section 9 of the Act. I confirm that the scheme only accepts subscriptions from qualified investors as specified in Section 9 of the Act. The particulars set out in this notification form are true to the best of my information, knowledge and belief.</p>			
Authorised Signature: _____			
Name:		Date:	
Capacity:			
Address:			
Tel. No.		Email address:	
H) BERMUDA MONETARY AUTHORITY USE ONLY			
		Authorised by	
		Date	