

MUFG Alternative Fund Services (Cayman) Limited	f Fax:	1-902- 493- 7632
c/o MUFG Fund Services (Halifax) Limited	Email:	investorserviceshalifax@mfsadmin.com
Summit Place, 2nd Floor		
1601 Lower Water Street		
Halifax, Nova Scotia, Canada, B3J 3P6		
Name of Shareholder:		
Complete legal name of the person or entity as per the Subse	cription Application	
Redemption Date:		
-		on each Wednesday Valuation Day in order to redeem on that he following week.
Wire Instructions for Shareholders wishin Redemption proceeds will be paid by wire transfer to the or bank account may provide details below. The Administrator	iginating bank account held on file. A su	ted bank account: ubscriber wishing redemption proceeds to be paid to a different
Beneficiary Bank and Branch		
Bank Address		
BIC/SWIFT/ABA Code	Account Number	
Account Name		
The Charabeldon benches immer arbitrary	sts the redemption of shares	
The Shareholder hereby irrevocably reque	-	s in (check Fund): Check if full redemption
VANTAGE GLOBAL INVESTME	NT FUND	
VANTAGE GLOBAL INVESTME	NT FUND Number of shares OR	Check if full redemption

SIGNATORY	CO-SIGNATORY (IF APPLICABLE)	
Name:	Name:	
Title:	Title:	
Signature:	Signature:	
Date:	Date:	