

TO BE SIGNED AND SENT BACK TO:

Tribunal d'arrondissement de et à Luxembourg
6ième chambre
Annexe St Esprit
7, rue du St Esprit
L-2080 Luxembourg

CLAIM

I, the undersigned / the company¹: _____

profession/function²: _____

address³: _____

e-mail: _____

hereby register/s my/its ordinary claim with the liquidation proceedings opened over the assets of the following company:

European Finance Opportunities S.C.A. SICAV-SIF, en liquidation judiciaire
société en commandite par actions,
société d'investissement à capital variable – fonds d'investissement spécialisé
siège social : L-8308 Capellen, 73-75, Parc d'Activités Capellen,
actuellement sans siège social connu
R.C.S. Luxembourg: B 224162

sub-fund⁴ : _____

amount of the claim: _____ EUR

reason for claim: _____ according to the attached documents.

I hereby certify that my claim is true, justified and unpaid.

I request that any payments be made to the following bank account (+ copy of bank account confirmation):

Account holder: _____

IBAN: _____

BIC: _____

_____ (place), on _____ (date) _____

signature

1 « I, the undersigned » if the creditor is a physical person / « the company » if the creditor is a company – Please delete as appropriate

2 « profession/function »: creditor's profession if a physical person / function of the signee if the creditor is a company. In the latter case please attach a power of attorney as a proof that the signee is entitled to sign for and on behalf of the company – Please delete as appropriate

3 « address »: private address if the creditor is a physical person / registered office if the creditor is a company

4 please indicate the name of the sub-fund you have a claim against