

Tribunal d'Arrondissement de Luxembourg
Greffes de la 6^{ème} section
L-2080 Luxembourg

Me Alain RUKAVINA
6^{ème} section TAL
Liquidation 10865/2018

Declaration of claim

The official liquidator will not consider claims submitted in any language other than French, German or English.

The undersigned (1) _____

electing address for services at (2) _____

hereby requests admission to the *privileged / unsecured* (3) liabilities of the judicial liquidation of

FUND HOUSE FCP SIF with registered office at 6, route de Trèves, L-2633 Senningerberg, registered with the Luxembourg Trade and Companies' Register under number K1192

For an amount of _____

Relating to _____

in accordance with the attached supporting documents. **Please indicate the nature of the claim (loan, bond, commercial paper,...). Please provide supporting documentation, including the original blocking certificate issued by a depositary institution for any claim represented by negotiable instruments.**

I request that any payments be made to the following bank account

Account number (*IBAN format*) _____

Bank name _____

BIC _____

Name of account holder _____

I confirm

- that I am aware of the provisions against money laundering and terrorism financing under Luxembourg law and confirm not to be involved in any transaction that might result in money laundering or terrorism financing.
- that in case of an investment, the origin of funds invested in **FUND HOUS FCP SIF** is as follows (4)
 - Professional income
 - Sale of securities
(*provide supporting documentation to justify ownership of the securities*)
 - Sale of real estate - date
(*provide supporting documentation to justify ownership*)
 - Sale of business – type – reason for sale
(*provide supporting documentation to justify ownership*)
 - Inheritance / donation
(*provide supporting documentation to justify the inheritance / donation*)
 - Life insurance – company
(*provide supporting documentation*)
 - Savings – origin : (*please indicate*)
 - Other origin : (*please indicate*)

In _____, signed on _____

I declare that the present claim is accurate and sincere.

J'affirme que la présente créance est sincère et véritable.

Signature : _____

- (1) Full name, profession and address of the creditor. Claims submitted by a legal entity are to be made on behalf of such entity by its legal representative in accordance with the law or articles of association.
- (2) Code of commerce Art. 499 [free translation] : *For creditors not domiciled in the municipality of the court, the statement of claims shall include an election of domicile in such municipality. In the absence thereof, all services and information for their intention can be made to the registry of the court.*

La déclaration contiendra, de la part du créancier non domicilié dans la commune où siège le tribunal, élection du domicile dans cette commune. A défaut d'avoir élu domicile, toutes significations et toutes informations pourront leur être faites ou données au greffe du tribunal.

- (3) Delete as appropriate.
- (4) Check the box(es) as appropriate.
- (5) Certification is to be made by a competent authority (embassy, consulate, notary or police commissioner) or by a financial institution.

DO NOT FILL IN - NE PAS REMPLIR =====

Admis au passif privilégié pour le montant de _____
Admis au passif chirographaire pour le montant de _____

Luxembourg, le _____

Le juge-commissaire

Le liquidateur