

Order form

As set out in the current investor information document, I hereby request approval to purchase of

_____ certificates at a nominal value of DKK 100, or for DKK _____ certificates in

CABA Flex
ISIN Code DK0061814068
in
Kapitalforeningen Wealth Invest ("Association")

The issue price for the acquired certificates is established as the book value at the date of purchase plus any premiums, *cf.*, generally the current Investor Information Document. The Investor Information Document is available free of charge upon request to Investeringsforvaltningsselskabet SEBinvest A/S, Bernstorffsgade 50, DK-1577 Copenhagen V and may also be downloaded at sebinvest.dk.

The completed and signed order form is submitted via my bank to **Skandinaviska Enskilda Banken, Denmark, Bernstorffsgade 50, DK-1577 Copenhagen**, at the following email: ifsadmin@seb.dk.

Payment

Payment for the acquired certificates in the unit class is effected on the second business day following the trading day and is made against registration of the units in the investor's account with VP Securities A/S.

The equity investments are registered in the name of the owner.

Please indicate by ticking whether you are investing

uncommitted funds/
corporate funds or pension funds

Amount to be withdrawn from account (must be completed):

Name of Bank:	Reg. no.:	Account no.:
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And the certificates to be placed in custody account:

Name of bank:	CD-identifier:	Custody account no.:
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Information about the subscriber (must be completed)

Name / company name	Civil reg. no. / central business reg. no.:
Address:	Postal code and town:

With my signature I confirm that I have read and understood the Investor Information Document.

Place

Date

Signature

INVESTOR STATEMENT

Pursuant to Section 5 of the Danish Act on Administrators of Alternative Investment Funds etc. (lov om forvaltning af alternative investeringsfonde m.v.), I hereby declare that I understand and accept the risks associated with investing in

CABA Flex
ISIN Code DK0061814068

which is a fund under

Kapitalforeningen Wealth Invest

In other words, I hereby acknowledge that I am aware of the lower level of investor protection in a capital association and that I am also familiar with the special risks associated with an investment in a leveraged fund.

I also confirm that I am aware that, by signing the present statement, I commit to investing at least EUR 100,000 or the equivalent value in a different currency in CABA Flex.

Information about the investor (must be completed)

Name / company name:	Civil reg. no. / central business reg. no.:
Address:	Postal code and town:

With my signature I confirm that I have read and understood the above information.

Place Date Signature