

Investment Form

Campaign	CISL Account No:			

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1. Purchaser	Canada-Israel Secu	irities, Limitea oni	D.O.B. (mm		Canadian residents/entities.
O Individual O Entity / Organization			D.O.D. (IIIII	,, aa, yyyy)	
Name(s) — As shown on government issued ident	ification				
Address		City		Province	Postal code
Home phone	Mobile phone		Bu	Isiness phone	
Email address					
If this is a gift, you can select a tribute card in s	section 9				
2. Select The Bond(s) You Would	Like To Purchase	For current rat	tes, terms a	and condition	ns, visit israelbonds.ca/rates
Bonds		Years to Matur			Total
		1 2	2 3 5	10 15	
PREMIUM JUBILEE BONDS (CAD) • \$500,000 min. with \$25,000 increments at time of purch lower minimum within 1 year of purchase. • Issued on the state of the state	nase. Opportunities to invest he 1 st and 15 th of each mon	at a \$CAD			\$
PREMIUM JUBILEE BONDS (USD) • \$1,00,000 min. with \$25,000 increments at time of purcl lower minimum within 1 year of purchase. • Issued on t	nase. Opportunities to invest the 1 st and 15 th of each mon	at a \$USD			\$
JUBILEE BONDS • \$25,000 min. with \$5,000 increments at time of purchas lower minimum within 1 year of purchase. • Issued on t	\$CAD anth. \$USD			\$	
MACCABEE BONDS • \$5,000 min. with \$500 increments at time of purchase. lower minimum within 1 year of purchase. • Issued on t	\$CAD			\$	
, ,		IIII. QOOD			
SABRA SAVINGS BONDS • \$5,000 minimum with \$500 increments available only at \$CAD: Maximum allowable amount purchased by one rate period is \$1,000,000 • Issued on the 1st and 15th o	\$CAD		\$		
SABRA SAVINGS BONDS • \$1,000 minimum with \$100 increments available only ar • Issued on the 1st and 15th of each month.	\$CAD \$USD		\$		
MAZEL TOV SAVINGS BONDS		17752			
• \$100 minimum with increments of \$1 at time of purcha • Maximum allowable amount purchased by one perso sales period, registered in the name of one holder, is \$ • Issued on the 1st of each month.	\$CAD \$USD		\$		
SHALOM SAVINGS BONDS FOR DONATING TO CHARITIES AND NON-PROFITS • \$100 minimum with increments of \$1 at time of purchas • Maximum allowable amount purchased by one purchas • Issued on the 1st of each month; Maturity value and rate • May only be held by a religious, charitable, literary, scient contributions to which are, at the time of transfer, deduce purposes. • May not be purchased for governmental entities, individuals.	se. er per rate period is \$5,000,0 may be rounded. ific or educational organizati tible for income and similar t	I. —			\$
Please make ALL payments payable directly to: STA	Tota	al purchase a	\$		
Date:	Tota	al purchase a	\$		
Reinvestment of maturing bond					
	itional Funds for Reinvest	tment of Maturing Bo	nd:	Refund Amou	nt (Only From Maturity Cheque):
\$				\$	

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3. Registered Owner(s) ● Same as above											
\$CAD Israel bonds can only be registered to Canadian residents or entities. \$USD Israel bonds can be registered to Canadian residents and entities as well as persons or entities residing outside of Canada.											
O Mr. O Mrs. O Ms.	O Miss O Dr.	0	Rabbi								
O Individual O Entity / Organ	O Individual O Entity / Organization Computershare Account #										
Name(s)						D.O.B	3. (mm/dd/	уууу)			
Address				City	Prov./State			State	Postal code/ZIP	Country	
Home phone		Mobile	e phone	,	Business phone						
Email address											
			Custodial Reg	ustodial Registration Please note: custodial registration is required for US Israel bonds holders who are minors.							
4. Information About	Purchaser			I							
SOURCE OF FUNDS:									Please specif	y for other:	
Business or employmer	nt income O P	roceed	s from sale of	property O	Estate pı	roceed	s O 0	ther:			
Other than Israel bonds, have you purchased any other exempt products* • No • Yes Specify amount: \$ in the last 12 months?											
Did you borrow money in o	der to purchase	e this in	vestment? C	No O Yes							
*Exempt products are securities that are not sold on an exchange and can be sold without a prospectus, offering memorandum or other offering document in reliance on a prospectus exemption. They are sometimes referred to as "exempt distributions" or "private placements".											
THIRD PARTY DETERMINATION											
Does a third party direct the activity in this account? (Select "Yes" only if a third party (an individual or an entity) not already listed on this form has influenced your decision to purchase this Israel Bond.)											
• Yes If "Yes" is selected, all fields are required.											
ONo If "No" is selected, you do not need to complete these fields.											
IF THIRD PARTY IS AN INDIVIDUAL:					IF THIRD PARTY IS AN ENTITY:						
Individual's Name				Entity	Name						
Address		Addre	Address								
City	Province/State/0	County	Postal/ZIP Cod	le City			ŀ	Provinc	e/State/County	Postal/ZIP Code	
Phone number		O.B. (mr	n/dd/yyyy)	Dhon	e number						
Phone number	D.	O.B. (IIII	n/uu/yyyy)	Phon	enumber						
Email address		Email	Email address								
Occupation/Primary business (if sole proprietor)			Regis or Ta	Registration, Incorporation or Tax Identification Number				mation			
I.			Prima	Primary business							

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5. Payments	Please make ALL payments payable directly to: STATE OF ISRAEL				
O Cheque O Bank draft O Money order O Wire transfer	○ Reinvestment− please in	Reinvestment— please include original bond certificate(s) when applicable			
6. Principal & Interest Payment Instructions					
Select one:	Use enclosed cheque for				
7. Privacy Consent					
By submitting personal information to Canada-Israel Securities, Limited / Israel Bonds, you agree to the collection, use, retention and disclosure of such personal information for the purposes described in our Privacy Policy, available at israelbonds.ca/privacy					
8. Where to Send This Form					
Completed forms can be sent to:					
Residents of all provinces/territories except Quebec Israel Bonds / Canada-Israel Securities, Limited PO Box 434, North York RPO Steeles West, Toronto, ON, M3J 0J3	:				
Residents of Quebec: Israel Bonds / Canada-Israël Valeurs Mobilières Limite PO Box 56033, Montreal CP Alexis Nihon, Montreal, QC, H3Z 3G3 Fax: 514.482.9640					
For registered mail, courier or in-person appointments please call our offices. For a Canadian office directory, visit israelbonds.ca					
9. Tribute Card (SELECT ONE OF THE TRIBUTE CARDS	ON THE NEXT PAGE)				
I would like a tribute card mailed to:					
From	To (as it will appear on the card)	Occasion			
Message (character limit of 300)					

Thank you for taking the time to complete and submit the Investment Form. We value your loyal and trusted business.

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Independence Blue

Dark Emerald

Cloudy Lavender

Morning Hope

Terra Cotta

Light Apple Blossom