



JUICYFIELDS PHARMA

PROOF OF FUNDS DECLARATION

Please complete and return to juicyfund@juicyfields.io along with any documentation required/requested.

Name: _____

Address: _____

Source of Funds: _____

Occupation: _____

Telephone: _____

The above mentioned confirms the availability of private funds for the purposes of investing into the JUICYFIELDS PHARMA Fund as discussed. The above named has declared lines of credit in place and/or available funds in the amount of € _____

The named party has immediate access to these funds and has access and proof of funds for the amount declared in this document. These funds are available immediately for wire transfer as instructed or directed otherwise for other payment methods.

Signed: _____

Date: _____