



**JOHN HANCOCK COMVEST PRIVATE INCOME FUND
SUBSCRIPTION AGREEMENT**

JOHN HANCOCK COMVEST PRIVATE INCOME FUND

SUBSCRIPTION AGREEMENT

This Subscription Agreement must be completed by the Subscriber and his/her Financial Advisor or registered representative (together "Financial Advisor" or "FA") and submitted prior to the close of the subscription period in order for the Subscriber's subscription to be processed. For timely approval and execution, please ensure all sections have been completed and signed properly.

Subscribers should retain a copy of their Subscription Agreement for their records.

If you have any questions about how to complete this Subscription Agreement, please contact your Financial Advisor. Subscription Agreements may only be completed by the Subscriber, who has received the related offering materials.

1. Introduction and Subscriber Information

This Subscription Agreement relates to your subscription to John Hancock Comvest Private Income Fund ("John Hancock Comvest Private Income Fund" or the "Fund").

An investment in the Fund is suitable only for sophisticated Investors who have the financial resources and the willingness to accept the substantial risks associated with such an investment and for whom an investment in the Fund does not constitute a complete investment program. The risks associated with an investment in the Fund are described in the Fund's Prospectus (including all parts, supplements, appendices and exhibits thereto, the "Prospectus").

By submitting this Subscription Agreement, in connection with a Subscription to the Fund, the Subscriber hereby: (1) certifies that he, she or it has received and carefully read the Fund's Prospectus prior to deciding whether to invest in the Fund, and (2) makes and affirms all of the representations, warranties, agreements, elections, acknowledgements and undertakings set forth in the Fund's Subscription Agreement.

Investors participating in the Fund through both taxable and tax-exempt accounts must submit separate Signature Pages for each such account.

Account Information

I hereby further certify that I agree to produce evidence to support the following certifications upon request.

▲ Account Title

▲ Custodian Name

▲ Brokerage Identification Number (BIN)

Subscriber Tax Status: Taxable (1099D/B Forms) Tax Exempt

SSN:(XXX-XX-XXXX)_____

Or

EIN: (XX-XXXXXXX)_____

PLEASE CHOOSE ONE:

U.S. Citizen

Non-U.S. Citizen

(must complete W-8 form)

Type of Account:

Charity/Welfare Organization*

Corporation*

Employee Benefit Plan

Estate

Foundation/Endowment*

Individual

Insurance Company*

Other_____

Joint Tenants

LLC (C-Corp)*

LLC (S-Corp)*

LLC (Partnership)*

LLC (Other)*

Partnership*

Pension Plan

Profit Sharing Plan

Rollover IRA

Roth IRA

Taft-Hartley Plan*

Traditional IRA

Trust

401K*

*** Please also complete pages 12 & 13.**

Additional Documentation Required:

1) Trusts – Include a copy of the title page, authorized individual page, and signature page of the Trust Agreement.

2) Estates – Include a copy of a probate document indicating the name of the Executor of the Estate, such as Letters Testamentary or Letters of Administration.

3) Corporations or Other Entities – Include a copy of one of the following documents: registered articles of incorporation, government-issued business license, partnership papers, plan documents, or other official documentation that verifies the entity and lists the authorized individuals.

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▲ Primary Signer #1 First Name

▲ Primary Signer #1 Last Name

▲ Primary Signer #1 Date of Birth

▲ Primary Signer #1 Social Security Number

▲ Residential or Business Address (including apartment or suite number - P.O. Box not permitted)

▲ City

▲ State

▲ Zip Code:

▲ Country of Residence for Addresses Outside of the U.S.

▲ Primary Signer #2 First Name

▲ Primary Signer #2 Last Name

▲ Primary Signer #2 Date of Birth

▲ Primary Signer #2 Social Security Number

▲ Residential or Business Address (including apartment or suite number - P.O. Box not permitted)

▲ City

▲ State

▲ Zip Code:

▲ Country of Residence for Addresses Outside of the U.S.

Mailing Address

If the mailing address or residential address of any person listed on the account is different than the address listed above, please list the relevant address.

▲ Residential or Business Address (including apartment, suite or P.O. Box number)

▲ City

▲ State

▲ Zip Code:

▲ Country of Residence for Addresses Outside of U.S.

2. Transfer on Death Beneficiary Information (Optional and only applies to Individual and Joint Accounts)

Please designate the beneficiary information for your account. If completed, all information is required. The following individual(s) or entity(ies) shall be primary and/or contingent beneficiary(ies). If neither primary nor contingent is indicated, the individual or entity will be deemed to be a primary beneficiary. If more than one primary beneficiary is designated and no distribution percentages are indicated, the beneficiaries will be deemed to own equal share percentages in the account(s). Multiple contingent beneficiaries with no share percentage indicated will also be deemed to share equally. (Not available for Louisiana residents.)

Primary

▲ First Name

▲ MI ▲ Last Name

▲ %

▲ Social Security Number

▲ Date of Birth

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Primary Secondary

▲ First Name ▲ MI ▲ Last Name ▲ %

▲ Social Security Number ▲ Date of Birth

Primary Secondary

▲ First Name ▲ MI ▲ Last Name ▲ %

▲ Social Security Number ▲ Date of Birth

3. ERISA and Other Plan Related Information and Representations

1) Are you a “benefit plan investor” (within the meaning of the Plan Assets Regulation (“Benefit Plan Investor”)) or will you use the assets of a Benefit Plan Investor to invest in the Fund? Benefit Plan Investor includes (i) any employee benefit plan (as defined in section 3(3) of the U.S. Employee Retirement Income Security Act of 1974, as amended (“ERISA”) subject to the provisions of Title I of ERISA, (ii) any plan described in section 4975(e)(1) of the U.S. Internal Revenue Code of 1986, as amended (“Code”) that is subject to Section 4975 of the Code (including, without limitation, an “individual retirement account” described in Section 408 or 408A of the Code, a Keogh plan, an Archer MSA described in Section 220(d) of the Code, a Coverdell education savings account described in Section 530 of the Code and a health saving account described in Section 223(d) of the Code, and (iii) any entity whose underlying assets include plan assets by reason of such an employee benefit plan’s or plan’s investment in the entity.

“Plan Assets Regulation” means the regulations issued by the United States Department of Labor at Section 2510.3-101 of Part 2510 of Chapter XXV, Title 29 of the United States Code of Federal Regulations, as modified by Section 3(42) of ERISA, as the same may be amended from time to time.

Yes No

2) Are you or will you be a person (including an entity) that has discretionary authority or control with respect to the assets of the Fund or a person who provides investment advice for a fee (direct or indirect) with respect to the assets of the Fund or an “affiliate” of such a person (a “Controlling Person”)? For purposes of this question, an “affiliate” includes a person who, directly or indirectly, through one or more intermediaries, controls, is controlled by, or is under common control with any such person, and “control” with respect to a person, other than an individual, means the power to exercise a controlling influence over the management or policies of such person.

Yes No

3) Are you, or will you be, an entity (other than an insurance company general account) whose assets will be deemed to constitute “plan assets” subject to ERISA or Section 4975 of the Code by reason of investment in such entity by other Benefit Plan Investors?

Yes No

4) Answer this Question (4) only if the answer to Question (3) above is “yes”: What is the maximum percentage of your assets that constitutes or will constitute “plan assets” subject to ERISA or Section 4975 of the Code?

_____%

5) If the Subscriber is or will be an insurance company general account, will any portion of its underlying assets in its general account constitute “plan assets” subject to ERISA or Section 4975 of the Code?

Yes No

6) Answer this Question (6) only if the answer to Question (5) above is “yes”: What is the maximum percentage of your assets that constitutes or will constitute “plan assets” subject to ERISA or Section 4975 of the Code?

_____%

You represent and warrant that, except as indicated above, you are not, will not be, and are not acting on behalf of, a Benefit Plan Investor or

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a Controlling Person during the time in which you are invested in any Common Shares.

If you are, or will be, or are acting on behalf of, a Benefit Plan Investor or a “governmental plan” within the meaning of Section 3(32) of ERISA, a “foreign plan,” or another plan or retirement arrangement that is not subject to Title I of ERISA and with respect to which Section 4975 of the Code does not apply, but is subject to federal, state, local, non-U.S. or other laws or regulations that are similar to such provisions of ERISA or the Code (“Similar Law”) or an entity or that is deemed to hold the assets of such a plan (each, an “Other Plan Investor” and, together with a Benefit Plan Investor, a “Plan”), you represent, warrant and agree that:

(i) the acquisition and the subsequent holding of Common Shares do not and will not constitute a non-exempt “prohibited transaction” within the meaning of Section 406 of ERISA or Section 4975 of the Code, or a violation of any Similar Law applicable to the Plan;

(ii) the decision to acquire Common Shares was made by a “fiduciary” of the Plan within the meaning of Section 3(21) of ERISA, Section 4975(e)(3) of the Code or Similar Law (the “Plan Fiduciary”) that is independent of the Fund, Comvest Credit Managers, LLC (the “Adviser”) and their respective employees, representatives and affiliates, is qualified to make investment decisions on behalf of the Plan and has authorized the Plan’s investment in the Fund;

(iii) the Plan’s investment in Common Shares conforms in all respects to the documents governing the Plan and, assuming the assets of the Fund do not constitute “plan assets” subject to the provisions of Title I of ERISA or Section 4975 of the Code or Similar Law, complies with all applicable requirements of ERISA, Section 4975 of the Code and Similar Law;

(iv) the Plan Fiduciary has been informed about the fee structure of the Fund, including the incentive fee component, and has concluded that such fees are reasonable and the investment in the Fund otherwise constitutes a reasonable contract or arrangement, and the Plan acknowledges and agrees that none of the Adviser or its employees, representatives or affiliates have any discretion, or are otherwise acting in a fiduciary capacity with respect to the Plan’s investment in the Fund, whether pursuant to the provisions of ERISA, Section 4975 of the Code or otherwise, and, without limiting the generality of the foregoing, the Plan and the Fiduciary has not relied on, and is not relying on, any investment advice or recommendation of any such person with respect to the Plan’s investment in the Fund;

(v) the Fiduciary has considered the investment in the Fund and has determined that, in view of such considerations, the purchase of Common Shares is consistent with the Fiduciary’s responsibilities under ERISA or Section 4975 of the Code, including (i) whether the investment in the Fund is prudent; (ii) whether the investment or investment course of action is reasonably designed as part of that portion of the portfolio managed by the Fiduciary, taking into account both the risk of loss and the opportunity for gain that could result therefrom; (iii) whether the Plan’s current and anticipated liquidity needs would be met, given the limited rights to transfer the Common Shares or have the Common Shares repurchased; (iv) whether the investment would permit the Plan’s overall portfolio to remain adequately diversified; (v) whether the investment is permitted under documents governing the Plan; (vi) whether the investment may result in any adverse tax consequences to the Plan; and (vii) the risks associated with an investment in the Fund;

(vi) the Fiduciary (i) is responsible for the decision to invest in the Fund; (ii) is independent of the Fund, the Adviser and all of their respective affiliates; (iii) has determined that each of the Fund and the Adviser is not a “party in interest” or “disqualified person” (as such terms are defined in ERISA and Section 4975 of the Code) with respect to the Plan; (iv) is qualified to make such investment decision and has, to the extent it deems necessary, consulted its own investment advisors and legal counsel regarding the investment in the Fund; and (v) in making its decision to invest in the Fund has not relied on any advice or recommendation of the Fund, the Adviser or any of their affiliates;

(vii) the Plan acknowledges that the Fund has the authority to require the repurchase, withdrawal or other cancellation of any Common Shares if it is determined that the continued holding of such Common Shares could result in the Fund being subject to the provisions of Title I of ERISA or Section 4975 of the Code; and

(v) without limiting the remedies available in the event of a breach, the Plan agrees promptly to provide to the Fund such information as the Fund may from time to time reasonably request for purposes of determining whether the assets of the Fund are “plan assets” within the meaning of the Plan Assets Regulation, and any other matters relating to ERISA or compliance with ERISA, Section 4975 of the Code or Similar Law arising in connection with the Plan’s investment in the Fund, or the operation or investments of the Fund.

The foregoing representations and warranties shall be deemed repeated and reaffirmed on each day you remain invested in any Common Shares. Without limiting the remedies available in the event of a breach, if at any time the foregoing representations and warranties shall cease to be true, including because there is a change in your Plan status or the percentage of assets that constitute “plan assets” subject to the provisions of Title I of ERISA or Section 4975 of the Code, then you shall promptly notify the Fund in writing.

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SUBSCRIPTION SIGNATURE PAGES

4. Investment Selection

Class S

Gross Subscription Amount: \$ _____
Less: Placement Fee (up to 3.5% (i.e., .035) of Gross Subscription Amount): \$ _____
Net Subscription Amount: \$ _____
Initial Investment (\$2,500 minimum)

Class D

Gross Subscription Amount: \$ _____
Less: Placement Fee (up to 1.5% (i.e., .015) of Gross Subscription Amount): \$ _____
Net Subscription Amount: \$ _____
Initial Investment (\$2,500 minimum)

Class F

Gross Subscription Amount: \$ _____
Less: Placement Fee (up to 2.0% (i.e., .020) of Gross Subscription Amount): \$ _____
Net Subscription Amount: \$ _____
Initial Investment (\$2,500 minimum)

Class I

Amount: \$ _____
Initial Investment (\$10,000 minimum)

The minimum additional investment is \$500 for each class. John Hancock Investment Management Distributors LLC, the Fund's managing dealer or John Hancock, can waive the initial and subsequent minimum investment at its discretion.

5. Internal Revenue Code Certification

As required by federal law and under penalty of perjury, the Subscriber hereby represents, warrants and certifies as follows:

1. The Subscriber certifies that the Social Security/Taxpayer ID Number set forth in this document is the true, correct and complete Social Security/Taxpayer ID Number of the Subscriber.
2. The Subscriber is a "United States Person" (as defined in Section 7701(a)(30) of the Code) including a U.S. resident alien.
3. The Subscriber certifies that the Subscriber is not subject to backup withholding because: (a) the Subscriber is exempt from backup withholding, or (b) the Subscriber has not been notified by the Internal Revenue Service (IRS) that the Subscriber is subject to backup withholding as a result of failure to report all interest and dividends, or (c) the IRS has notified the Subscriber that the Subscriber is no longer subject to backup withholding. **The Subscriber must cross out item 3 if the Subscriber has been notified by the IRS that the Subscriber is currently subject to backup withholding because the Subscriber has failed to report all interest and dividends on the Subscriber's tax return.**
4. The Foreign Account Tax Compliance Act ("FATCA") code(s) entered on this form (if any) indicating that the Subscriber is exempt from FATCA reporting is correct. Exemption from FATCA reporting code (if any): _____.

By checking this box, the Subscriber certifies items 1-4 above, and agrees to notify his/her Financial Advisor within 30 days of any change in the information set forth above.

6. Cost Basis Election

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In order for us to determine the gain or loss when you participate in a repurchase offer of Common Shares, John Hancock must determine the "cost basis" for those shares. The cost basis is the value of each Common Share at the time you acquired it. The law requires John Hancock to select a default method to determine your cost basis.

John Hancock has decided to use what is known as the Average Cost method. Under this method, John Hancock will calculate the total cost of all Common Shares in your account and divide that cost by the total Common Shares in your account; this will determine the cost basis for the Common Shares that you are tendering for repurchase by the Fund. Please note that you are able to select a different method below if you would prefer it.

Note: IRS Regulations do not permit you to change the method used to determine the cost basis of a settled trade.

I choose the Fund's default method of Average Cost

I choose a method other than Average Cost:

FIFO –First In, First Out (John Hancock will repurchase the oldest available Common Shares first, using their cost basis to determine the gains or losses you incur on the repurchase.)

Specific Identification (When you repurchase Common Shares, you must tell John Hancock which particular Common Shares you are selling; your gain or loss will vary based on the Common Shares you select.)

7. Important Notices

The USA Patriot Act

In order to fight the funding of terrorist activity and money laundering, the selling agent, like other financial institutions, is required by law to obtain, verify, and record information that identifies each person who opens an account, including legal persons such as corporations and partnerships. When an account is opened, the selling agent asks for information to identify the person opening the account and in some cases the persons controlling the account. The selling agent may also ask for identifying corporate documentation. Such information, like all customer information, is confidential as required by law. The Subscriber hereby specifically confirms and acknowledges its representations relating to Money Laundering Prevention contained in the Fund's Subscription Agreement.

8. Other Information

a) Electronic Delivery - Instead of receiving paper copies of the prospectus, prospectus supplements, annual reports, proxy statements, and other shareholder communications and reports, you may elect to receive electronic delivery of shareholder communications from John Hancock Comvest Private Income Fund. If you would like to consent to electronic delivery, including pursuant to email, please sign your initials into the box options below for this election.

By consenting below to electronically receive shareholder communications, including your account-specific information, you authorize said offering(s) to either (i) email shareholder communications to you directly or (ii) make them available on our website and notify you by email when and where such documents are available. You will not receive paper copies of these electronic materials unless specifically requested, the delivery of electronic materials is prohibited or we, in our sole discretion, elect to send paper copies of the materials.

By consenting to electronic access, you will be responsible for certain costs, such as your customary internet service provider charges, and may be required to download software in connection with access to these materials. You understand this electronic delivery program may be changed or discontinued and that the terms of this agreement may be amended at any time. You understand that there are possible risks associated with electronic delivery such as emails not transmitting, links failing to function properly and system failure of online service providers, and that there is no warranty or guarantee given concerning the transmissions of email, the availability of the website, or information on it, other than as required by law.

By signing its initials below, the subscriber agrees that shareholder communications will be sent electronically to the email address provided below. By not signing its initials below the subscriber agrees to receive shareholder communications to the address of record.

I initial for consent to electronic delivery: _____
▲ Initials

If electronic delivery is consented to provide email address here: _____

You will receive an email from John Hancock confirming your e-delivery elections. Please note you can change your selection at any time.

Monthly statements and annual tax forms can only be accessed by signing up for online account access and registering for e-delivery.

b) Distribution Options - Subscriber agrees by signing its initials into the "OPT-IN" box below that all dividends and capital gains to be distributed from time to time by the Fund to the Subscriber will be reinvested in Common Shares of the Fund. By signing its initials into the "OPT-OUT" box below, the Subscriber elects to receive all dividends and capital gains in cash. Failure to sign your initials into one of the boxes below to this Section 8(b) will result in your Subscription Agreement being null and void and returned to you as not in good order. In the event that neither box is initialed and your Subscription Agreement is inadvertently accepted instead of being returned to you as not in good order and the Subscriber is a resident of Washington, then the Subscriber will automatically receive all distributions in cash unless the Subscriber elects to participate in our Dividend Reinvestment Plan ("DRIP").

I initial for consent to have all dividends and capital gains distributed from time to time by the Fund reinvested in Common Shares of the Fund:

OPT-IN ▲ Initials _____

I initial for consent to have all dividends and capital gains distributed from time to time by the Fund be received in cash:

OPT-OUT ▲ Initials _____

Shareholders located in Washington will automatically receive their distributions in cash unless they elect to participate in our Dividend Reinvestment Plan.

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9. Linking A Bank Account to Your John Hancock Comvest Private Income Fund Account

This section is available to direct accounts only.

▲ Bank Name

▲ Bank ABA Routing Number

▲ Account Name

▲ Account Number

▲ For Further Credit Name

▲ For Further Credit Account Number

10. Subscriber Representations

John Hancock Comvest Private Income Fund is required by law to obtain, verify and record certain personal information from you or persons on your behalf in order to establish the account. Required information includes name, date of birth, permanent residential address and social security/taxpayer identification number. We may also ask to see other identifying documents. If you do not provide the information, John Hancock Comvest Private Income Fund may not be able to open your account. By signing the Subscription Agreement, you agree to provide this information and confirm that this information is true and correct. If we are unable to verify your identity, or that of another person(s) authorized to act on your behalf, or if we believe we have identified potentially criminal activity, we reserve the right to take action as we deem appropriate which may include closing your account.

Please separately initial each of the representations below. Except in the case of fiduciary accounts, you may not grant any person a power of attorney to make the representations on your behalf.

In order to induce John Hancock Comvest Private Income Fund to accept this subscription, I (we) hereby represent and warrant as follows (Each account holder must hand-initial representations 1 – 9, to the extent applicable):

1. I (we) have received the prospectus (as amended or supplemented) for John Hancock Comvest Private Income Fund at least five business days prior to the date hereof.
2. I (we) have (A) a minimum net worth (not including home, home furnishings and personal automobiles) of at least \$250,000, or (B) a minimum net worth (as previously described) of at least \$70,000 and a minimum annual gross income of at least \$70,000. If I am an entity that was formed for the purpose of purchasing Common Shares, each individual that owns an interest in the entity meets this requirement.
3. I am (we are) a resident of Alabama, California, Idaho, Iowa, Kansas, Kentucky, Maine, Massachusetts, Missouri, Nebraska, New Jersey, New Mexico, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Puerto Rico, Tennessee, or Vermont and in addition to the general suitability requirements described above, I meet the higher suitability requirements, if any, imposed by my state of primary residence as set forth in the prospectus under "SUITABILITY STANDARDS." If I am an entity that was formed for the purpose of purchasing Common Shares, each individual that owns an interest in the entity meets this requirement.

In the case of sales to fiduciary accounts, the minimum standards set forth in the prospectus under "SUITABILITY STANDARDS" shall be met by the beneficiary, the fiduciary, account, or, by the donor or grantor, who directly or indirectly supplies the funds to purchase the shares if the donor or grantor is the fiduciary.

Primary	Co-Investor	Co-Investor
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

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4. I am (we are) domiciled or have a registered office in the European Economic Area or in the United Kingdom, and qualify as (i) a “professional investor,” within the meaning of Annex II to Directive 2014/65/EU or the United Kingdom Alternative Investment Fund Managers Regulations 2013 (SI 2013/1773) as amended, as applicable, or (ii) a “certified sophisticated investor” as defined under the Financial Services and Markets Act 2000 of the United Kingdom.
5. I acknowledge that there is no public market for the Common Shares, Common Shares of this offering are not liquid and appropriate only as a long-term investment.
6. I am purchasing the Common Shares for my own account, or if I am purchasing Common Shares on behalf of a trust or other entity of which I am a trustee or authorized agent, I have due authority to execute this subscription agreement and do hereby legally bind the trust or other entity of which I am trustee or authorized agent.
7. I acknowledge that subscriptions must be submitted at least five business days prior to first day of each month and my investment will be executed as of the first day of the applicable month at the net asset value (“NAV”) per share as of the day preceding day. I acknowledge that I will not know the NAV per share at which my investment will be executed at the time I subscribe and the NAV per share as of the last day of each month will generally be made available at the Fund’s website within 20 business days of the last day of each month.
8. I acknowledge that my subscription request will not be accepted any earlier than the first calendar day of each month. I acknowledge that I am not committed to purchase Common Shares at the time my subscription order is submitted and I may cancel my subscription at any time before the time it has been accepted as described in the previous sentence. I understand that I may withdraw my purchase request by notifying the transfer agent in writing or through my financial intermediary.

Primary	Co-Investor	Co-Investor
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

11. Signature

If you do not have another broker-dealer or other financial intermediary introducing you to John Hancock Comvest Private Income Fund, then John Hancock Investment Management Distributors LLC may be deemed to be acting as your broker-dealer of record in connection with any investment in John Hancock Comvest Private Income Fund. For important information in this respect, see Section 12 below.

I declare that the information supplied in this Subscription Agreement is true and correct and may be relied upon by John Hancock Comvest Private Income Fund. I acknowledge that the Broker / Financial Advisor indicated in Section 11 of this Subscription Agreement and its designated clearing agent, if any, will have full access to my account information, including the number of Common Shares I own, tax information (including the Form 1099) and repurchase information. Investors may change the Broker / Financial Advisor of record at any time by contacting the transfer agent at (833) 752-9167.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding. Instructions for form W-9 will be provided upon request.

▲ Subscriber’s Name (print clearly)	▲ Title (as applicable)
▲ Subscriber’s Signature	▲ Date
▲ Additional Subscriber’s Name (if any, print clearly)	▲ Additional Subscriber’s Title (as applicable)
▲ Additional Subscriber’s Signature (if any)	▲ Date

Financial Advisor Information

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▲ FA Name (Print clearly for proper record keeping)

▲ Representative ID

▲ Firm Name

▲ Email Address

▲ Phone

Please note that unless previously agreed to in writing by John Hancock Comvest Private Income Fund, all sales of securities must be made through a Broker, including when an RIA has introduced the sale. In all cases, Section 11 must be completed.

The undersigned confirm(s), which confirmation is made on behalf of the Broker with respect to sales of securities made through a Broker, that they (i) have reasonable grounds to believe that the information and representations concerning the investor identified herein are true, correct and complete in all respects; (ii) have discussed such investor's prospective purchase of Common Shares with such investor; (iii) have advised such investor of all pertinent facts with regard to the lack of liquidity and marketability of the Common Shares; (iv) have delivered or made available a current prospectus and related supplements, if any, to such investor; (v) have reasonable grounds to believe that the investor is purchasing these Common Shares for his or her own account; (vi) have reasonable grounds to believe that the purchase of Common Shares is a suitable investment for such investor, that such investor meets the suitability standards applicable to such investor set forth in the prospectus and related supplements, if any, and that such investor is in a financial position to enable such investor to realize the benefits of such an investment and to suffer any loss that may occur with respect thereto; and (vii) have advised such investor that the Common Shares have not been registered and are not expected to be registered under the laws of any country or jurisdiction outside of the United States except as otherwise described in the prospectus. The undersigned Broker, Financial Advisor or Financial Representative listed in Section 11 further represents and certifies that, in connection with this subscription for Common Shares, he/she has complied with and has followed all applicable policies and procedures of his or her firm relating to, and performed functions required by, federal and state securities laws, rules promulgated under the Securities Exchange Act of 1934, as amended, including, but not limited to Rule 15l-1 ("Regulation Best Interest") and FINRA rules and regulations including, but not limited to Know Your Customer, Suitability and PATRIOT Act (Anti Money Laundering, Customer Identification) as required by its relationship with the investor(s) identified on this document.

THIS SUBSCRIPTION AGREEMENT AND ALL RIGHTS HEREUNDER SHALL BE GOVERNED BY, AND INTERPRETED IN ACCORDANCE WITH, THE LAWS OF THE STATE OF DELAWARE.

If you do not have another broker-dealer or other financial intermediary introducing you to John Hancock Comvest Private Income Fund, then John Hancock Investment Management Distributors LLC may be deemed to act as your broker of record in connection with any investment in John Hancock Comvest Private Income Fund. If you want to receive financial advice regarding a prospective investment in the Common Shares, contact your broker-dealer or other financial intermediary.

Please print, sign, and scan this page if applicable.

▲ FA Signature

▲ Date

FINANCIAL ADVISORS: PLEASE ENSURE ALL FIELDS ARE COMPLETE PRIOR TO SUBMITTING THIS DOCUMENT.

Completed subscription agreements should be sent to:

U.S. Mail:

John Hancock Comvest Private Income Fund
c/o Ultimus Fund Solutions, LLC
P.O. Box 46707
Cincinnati, OH 45246-0707

Wire Instructions:

First National Bank of Omaha
1620 Dodge St.
ABA: 104000016
DDA: 734261458
Account Name: Comvest Deposit Account
FFC: [INVESTOR NAME] [Investor Account No.]

Overnight Mail:

John Hancock Comvest Private Income Fund
c/o Ultimus Fund Solutions, LLC
225 Pictoria Drive, Suite 450
Cincinnati, OH 45246

Phone Number:

(833) 752-9167

PLACE CUSTODIAL
ACKNOWLEDGMENT OR STAMP HERE

JOHN HANCOCK COMVEST PRIVATE INCOME FUND SUBSCRIPTION AGREEMENT

12. Other Important Information

If investors participating in the DRIP or making subsequent purchases of Common Shares of John Hancock Comvest Private Income Fund experience a material adverse change in their financial condition or can no longer make the representations or warranties set forth in Section 10 above, they are asked to promptly notify John Hancock Comvest Private Income Fund and the Broker in writing. The Broker may notify John Hancock Comvest Private Income Fund if an investor participating in the DRIP can no longer make the representations or warranties set forth in Section 10 above, and John Hancock Comvest Private Income Fund may rely on such notification to terminate such investor's participation in the DRIP.

No sale of Common Shares may be completed until at least five business days after you receive the final prospectus. Subscribers are encouraged to read the prospectus in its entirety for a complete explanation of an investment in the Common Shares of John Hancock Comvest Private Income Fund.

To be accepted, a subscription request must be made with a completed and executed Subscription Agreement in good order and payment of the full purchase price at least five business days prior to the first calendar day of the month (unless waived). All items on the Subscription Agreement, other than those marked optional, must be completed in order for your Subscription Agreement to be processed. You will receive a written confirmation of your purchase.

The Fund and John Hancock will direct any dealers to transmit a copy of this executed Subscription Agreement or copy of the signature page of such agreement, stating among other things, the name of the purchaser, current address, and the amount of the investment to Ultimus Fund Solutions, LLC, together with a check or wire transfer.

JOHN HANCOCK COMVEST PRIVATE INCOME FUND

SUBSCRIPTION AGREEMENT

Only complete pages 12 & 13 if you are establishing one of the following account types.

Charity/Welfare Organization
Corporation
Foundation/Endowment
LLC (S-Corp)
LLC (Other)
Taft-Hartley Plan

Insurance Company
LLC (C-Corp)
LLC (Partnership)
Partnership
401K

I. GENERAL INSTRUCTIONS

What is this form?

To help the U.S. government fight financial crime, U.S. Treasury Financial Crime Network regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

Who has to complete this form?

To help the U.S. government fight financial crime, U.S. Treasury Financial Crime Network regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

This form must be completed by the person opening a new account on behalf of a **legal entity** with any of the following U.S. financial institutions: (i) a bank or credit union; (ii) a broker or dealer in securities; (iii) a mutual fund; (iv) a futures commission merchant; or (v) an introducing broker in commodities.

For the purposes of this form, a legal entity includes a corporation, limited liability company, or other entity that is created by a filing of a public document with a Secretary of State or similar office, a general partnership, and any similar business entity formed in the United States or a foreign country. Legal entity does not include sole proprietorships, unincorporated associations, or natural persons opening accounts on their own behalf.

What information do I have to provide?

This form requires you to provide the name, address, date of birth and Social Security number (or passport number or other similar information, in the case of Non-U.S. Persons) for the following individuals (i.e., the beneficial owners):

- (i) Each individual, if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 25 percent or more of the shares of a corporation); **and**
- (ii) An individual with significant responsibility for managing the legal entity customer (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer).

The number of individuals that satisfy this definition of "beneficial owner" may vary. Under section (i), depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under section (i), you must provide the identifying information of one individual under section (ii). It is possible that in some circumstances the same individual might be identified under both sections (e.g., the President of Acme, Inc. who also holds a 30% equity interest). Thus, a completed form will contain the identifying information of at least one individual (under section (ii)), and up to five individuals (i.e., one individual under section (ii) and four 25 percent equity holders under section (i)).

The financial institution may also ask to see a copy of a driver's license or other identifying document for each beneficial owner listed on this form.

II. CERTIFICATION OF BENEFICIAL OWNER(S)

Persons opening an account on behalf of a legal entity must provide the following information:

- a. Name and Title of Natural Person Opening Account _____
- b. Name of Account _____
- c. Type of Account (S Corp, C Corp, Partnership, Etc): _____
- d. Address of Legal Entity for Which the Account is Being Opened: _____

JOHN HANCOCK COMVEST PRIVATE INCOME FUND
CERTIFICATION REGARDING BENEFICIAL
OWNERS OF LEGAL ENTITY CUSTOMERS

e. The following information for each individual, if any, who, directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, owns 25 percent or more of the equity interests of the legal entity listed above:

Name	Date of Birth	Address (Residential Street Address)	For U.S. Persons: Social Security Number	For Non-U.S. Persons: Social Security Number, Passport Number and Country of Issuance, or other similar identification number ¹

(If no individual meets this definition, please write “Not Applicable” on the line below)

(f) The following information for an individual with significant responsibility for managing the legal entity listed above, such as:

- ▲ An executive officer or senior manager (e.g., Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, Treasurer); or
- ▲ Any other individual who regularly performs similar functions.

(If appropriate, an individual listed under section (e) above may also be listed in this section (f)).

Name	Date of Birth	Address (Residential Street Address)	For U.S. Persons: Social Security Number	For Non-U.S. Persons: Social Security Number, Passport Number and Country of Issu- ance, or other similar identifica- tion number ¹

I, _____ (name of natural person opening account), hereby certify, to the best of my knowledge, that the information provided above is complete and correct.

▲ Signature

▲ Date

▲ Legal Entity Identifier (If Obtained)

¹ In lieu of a passport number, Non-U.S. Persons may also provide a Social Security Number, an alien identification card number, or number and country of issuance of any other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard.