

GIFT OF SECURITIES

TRANSFER AUTHORIZATION FORM

1. DONOR IN	NFORMATION			
Name:				
Phone:				
Address: 2. DONOR'S BROKER INFORMATIONS				
				Institution Nar
Phone:				
	rity:			
# of Units:				
Account No.: _	Account No.: Approx. Value of Each Unit: \$			
Approx. Value				
Approx. Total Value of Donation: \$				
Date of Transf	Date of Transfer to LHSF's Account:			
ACCOUNT	HEALTH SCIENCES FO AT CIBC WOOD GUN E: Michael McDonald/Bra One London Place, 259 London, ON N6A 5R8	NDY SECUR	RITIES ns, CIBC Wood Gundy	
Phone:	519.640.7767	Fave 510.0	00.5007	
	451-02344-14	Fax: 519.663.5037 CDS Participant (FINS) #: T079		
Dealer No. (mutual fund transfers):			•	
4. DONOR AU	JTHORIZATION			
Donor Signature		Date		
 Donor Signature		Date		

INSTRUCTIONS

- Complete this Gift of Securities Transfer Authorization Form. Your broker can assist you.
- Contact Us your broker will advise us of the securities donation and we'll provide our broker's information and clarify any questions. Janine Ogglesby: 519.685.8500 ext. 52364
- Authorization simply sign to authorize the transfer of securities to London Health Sciences Foundation (LHSF). Your broker must initiate the transfer to our account.
- 4. **Scan** have your broker scan the information to: FoundationFinance@lhsc.on.ca
- Fax CIBC: Michael McDonald/Brandi Simmons at 519.663.5037.
- Confirmation Once the security is received in our account, LHSF will confirm with you. The value of the charitable receipt is determined by the closing price on the day LHSF receives the securities into our account.

Due to the cost of processing securities trades, we respectfully request a minimum Fair Market Value donation of \$1,000.

