

Thank you for your gift. Please completed this form and send copies to your broker, Anne Tatoff, VP Corporate Services, Trillium Health Partners Foundation under Section II and the receiving broker selected under Section III.

I. DONOR/ TRANSFEROR INFORMATION				<i>*Mandatory Field</i>
Primary Account Holder – Last Name/ Organization*		First Name*		Telephone*
Joint Account Holder – Last Name*		First Name*		Telephone*
Street Address*	City*	Province*	Country*	Postal Code*
Broker Contact*			Telephone*	Email*
Broker Institution Name*			Account No.*	CUID*

II. TRILLIUM HEALTH PARTNERS FOUNDATION (THPF)				
CRA Registered Charitable No	Address	City	Province	Postal Code
11924 5678 RR0001	800-89 Queensway West	Mississauga	ON	L5B 2V2
THPF Contact	Telephone/ Fax			Email
Anne Tatoff	(T) (905) 848-7580 ext 2983; (C) (416) 315-0672 (F) (905) 804-7927			anne.tatoff@thp.ca

III. THPF BROKER OPTIONS				<i>Select one of:</i>
<input type="checkbox"/>	<b>Broker Institution Contact</b>	<b>Telephone</b>	<b>Fax</b>	<b>Email</b>
	Customer Service	1-800-465-5463, option 3	1-877-639-4547	anne.tatoff@thp.ca
<input type="checkbox"/>	<b>Broker Institution Name</b>	<b>Account No.</b>	<b>CUID</b>	<b>Cost</b>
	TD Waterhouse	59Y263A (CDN) ; 59Y263B (US)	T007; GIST	<b>\$ 9.99/ trade</b>
<input type="checkbox"/>	<b>Broker Institution Contact</b>	<b>Telephone</b>	<b>Fax</b>	<b>Email</b>
	Sherilyn Ketchen	(416) 842-3323	(416) 842-3472	sherilyn.ketchen@rbc.com
<input type="checkbox"/>	<b>Broker Institution Name</b>	<b>Account No.</b>	<b>CUID: DOMA</b>	<b>Cost</b>
	RBC Wealth Management	423-06827-10-LWO	US DTC: 5002	Up to \$ 125/ trade
<input type="checkbox"/>	<b>Broker Institution Contact</b>	<b>Telephone</b>	<b>Fax</b>	<b>Email</b>
	Bruce MacKay	(416) 842-7120	(416) 842-7127	bruce.mackay@rbc.com
<input type="checkbox"/>	<b>Broker Institution Name</b>	<b>Account No.</b>	<b>CUID</b>	<b>Cost</b>
	RBC Dominion Securities	421-58809-17	T002; US DTC: 5002	Varies by size of trade. Confirm with broker
<input type="checkbox"/>	<b>Broker Institution Contact</b>	<b>Telephone</b>	<b>Fax</b>	<b>Email</b>
	Matthew Horan	(416) 865-6445	(416) 865-6448	matthew.horan@scotiamcleod.com
<input type="checkbox"/>	<b>Broker Institution Name</b>	<b>Account No.</b>	<b>CUID</b>	<b>Cost</b>
	Scotia McLeod	467-21060-12-5BW	SCOT; DTC: 5011	Varies by size of trade. Confirm with broker

89 QUEENSWAY WEST, SUITE 800, MISSISSAUGA, ONTARIO, L5B 2V2

IV. REQUEST DETAILS			*Mandatory Field
<p>▪ Please accept this form as authorization to gift/transfer the following securities held in my/our account to the charity indicated above</p>			
Quantity*	Security Description*	CUSIP/Symbol*	Designation **
			___ Area of greatest need ___ Program: _____
			___ Area of greatest need ___ Program: _____
			___ Area of greatest need ___ Program: _____
			___ Area of greatest need ___ Program: _____

*\*\*Your Income Tax Receipt will be valued based on the closing price on the day the shares are transferred to THPF's account.*

V. DONATION/ TRANSFER AUTHORIZATION		*Mandatory Field
Primary Account Holder Signature:*		Date:*
Joint Account Holder Signature:*		Date:*