

PROCEDURES FOR DONATING PUBLICLY LISTED SECURITIES TO HUNTSVILLE HOSPITAL FOUNDATION

- If you are transferring securities electronically, please complete the Huntsville Hospital Foundation Agreement to Donate Publicly Listed Securities form provided by the Foundation.

In order for a tax receipt to be issued correctly; a copy of the completed form must be received by the Foundation office and a copy also must go to your broker.

- If you are donating actual printed shares, please endorse each of the shares or make them payable to the Huntsville District Memorial Hospital Foundation. Please send the shares by courier directly to the Foundation. The Foundation will then send the shares on to its Investment Broker.
- Canada Customs & Revenue Agency has determined that the value of a charitable tax receipt for donated securities will be determined by the closing value of the securities on the date the shares arrive in the possession of the Foundation (either in printed version at the office or by electronic transmission to the Foundation's Broker).
- The Foundation will immediately contact the Donor upon receipt of the securities and will advise the Donor of the value of the charitable tax receipt that is to be issued.
- Donated securities may be held or sold by the Foundation as determined by the investment policies of the Foundation.

Contact:

Gerry Dearing

Executive Director

Huntsville Hospital Foundation

4-100 Frank Miller Drive Huntsville ON P1H 1H7

T: 705 789 2311 x 2492 F: 705 789 GIVE (4483)

HDMHF Broker: *Account # 6C4QBXA*

HDMHF Charitable Registration Number: *89371 5292 RR0001*



3000-130 King Street West, Box 21 Toronto, ON M5X 1J9

Date: _____

Charitable Donation of Securities In Kind

RUSH

Please complete this form for use as Authorization to facilitate a timely transfer. Transfer requests that do not contain the information requested herein may result in delayed deliveries. Please ensure a copy of any necessary supporting documentation is attached to your transfer request such as a Corporate Resolution with sample signatures for a corporate account, Powers of Attorney where the signing authority for an account differs from the client of record etc.

Please transfer the following position: _____ **Description:** _____
Quantity: _____ **CUSIP:** _____

Delivering Institution Information (Required) Delivering Institution

Name: _____

Account Name: _____

Account #: _____ **Delivering Institution FINS or DTC:** _____

Contact Name: _____ **Phone:** _____

Receiving Institution Information (Required) Receiving Institution

Name: National Bank Correspondent Network

Account Name: Huntsville District Memorial Hospital Foundation 705-789-4756 | www.huntsvillehospitalfoundation.ca

Charitable Registration No: 89371 5292 RR0001

Account #: 6C4QBXA **Receiving Institution FINS T007 or DTC:** 5036

Contact Name: Ajit Rekhy **Phone:** 416-542-2295

Additional Information: Please include any additional necessary 'For Further Credit' or Reference Information.

Contributing Client Authorization:

Client Signature: _____

Delivering Institution:

Please forward a completed copy of this form to Client Transfer Services Transfer In Department prior to making your delivery. Email to ajit.rekhy@nbc.ca

This message including any attachment(s) is intended only for the addressee and may contain information that is confidential, legally privileged or exempt from disclosure under applicable law. Any review, retransmission, dissemination or other use of or taking any action in reliance upon this information by any person or entity other than the addressee is prohibited. If you have received this communication in error or are not the addressee, please immediately notify the sender and destroy all copies.