Charitable Donation Of Securities In Kind



Member of CIPF & IIROC

	Account #
IA #	
	Branch

Donor Information						
Name		Address				
		V				
ty Province		<u> </u>	Postal Code		Phone Number	
Donor's Brokerage Infor	mation					
Financial Institution Name		Contact	Name			
Donor's Account Number:		Phone N	umber	_		
E-mail		CUID:		DTC #:		
Securities To Be Transfe	rred					
Name of Security:			Qua	intity	CUSIP/ISIN:	
. Name of Security:			Qua	ntity	CUSIP/ISIN:	
Charitable Organization	& Brokerage Info	ormation				
Registered Charity			Charit	y Registration #		
Charity E-mail		Charity Broker A/C #				
Name of Receiving Firm		CUID:		DTC #:	Phone Number	
Broker Contact Name		Broker Contact E-mail				
Additional Details						
Donor Authorization:						
hereby give authority to my broker	age firm to deliver the abo	ove noted securities	without restriction a	as a charitable donation	as instructed on this form.	
Signature of Donor	 Signature o	f Donor	Date (r	mm/dd/yyyy)		

To contact Raymond James please direct any questions to:

transfersdonations@raymondjames.ca