

Gift of Securities – Transfer Authorization Form

1. Donor Information

Name: _____
 Phone number: _____
 Address: _____
 Email: _____
 CMHATV Highest Needs
 CMHATV Rural
 Fund: My Sisters' Place
 Addiction Services
 Oxford County

2. Donor's Broker Information

Institution Name: _____
 Phone: _____
 Firm: _____
 Name of Security: _____
 # of Units: _____
 Account number: _____
 Approximate value of each unit: \$ _____
 Approximate total value of donation: \$ _____
 Date of Transfer to CMHATV's account: _____

3. Canadian Mental Health Association Thames Valley (will be displayed as "WOTCH") Brokerage Account at TD Direct Investing

Contact name: TD Direct Investing
 Branch: Tower 2, 2nd Floor, 3500 Steeles Ave E
 Markham, ON L3R 0X1
 Telephone: 1-800-465-5463

 Account No: 484X33A
 CUID: GIST

4. Donor Authorization

Donor signature

Date

Donor signature

Date

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

CMHA Thames Valley Addiction and Mental Health Services charitable registration number: 118834217 RR 0001

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've provided our broker's information.
- If you have any questions please contact **Wendy Sanderson** at wendy.sanderson@cmhatv.ca or by phone: 519-668-0624 x 1008
- Authorization** - simply sign to authorize the transfer of securities to CMHATV Addiction and Mental Health Services. Your broker will initiate the transfer to our account.
- Scan** - have your broker scan this completed form and email to: securities@cmhatv.ca
- Confirmation** - Once the security is received in our account, we will confirm with you. The value of the charitable receipt is determined by the closing price on the day we receive the securities in our account.