

## **Directions for Electronic Transfer of Publicly Traded Securities or Mutual Funds**

## **Donor Steps:**

Transfer requests that do not contain the information requested herein or that are not faxed may result in delayed deliveries and issuance of tax receipts.

Step 1. Complete form with your investment advisor.

**Step 2.** Please email the completed and signed form to <a href="mailto:giftsofsecurities@spca.bc.ca">giftsofsecurities@spca.bc.ca</a>. This form is required for the issuing of an official receipt for tax purposes.

| Donor Name   | First Name       | Init      | tial   | Last Name          |                     |  |
|--|------------------|-----------|--|--------------------|---------------------|--|
| <ul><li>□ Mr.</li><li>□ Miss □ Dr.</li><li>□ Mrs.</li><li>□ Ms.</li><li>□ Prof.</li></ul>  |                  |           |  |                    |                     |  |
| Mailing Address  |                  | City      |  |                    | Province            | Postal Cod                                   |
| Phone Number   |                  | Ema       | il Address   |                    |                     | <u>                                     </u> |
| PLEASE TRANSFER THE  | FOLLOWING SECU   | IRITIES/M | UTUAL FUNDS  | ı                  |                     |  |
| SECURITY DESCRPTION Lacad Laca |                  | SD N      | O. OF SHARES   | CUSIP / ISIN       |                     |  |
|  |                  |           |  |                    |                     |  |
| MUTUAL FUND DESCRIPTION DCAD   |                  |           | O. OF UNITS /<br>OLLAR AMOUNT                                      | FUND CODE / FUND # |                     |  |
|  |                  |           |  |                    |                     |  |
|  |                  |           |  |                    |                     |  |
| Donors Signature   |                  |           |  | Date               |                     |  |
| DELIVERING INSTITUTION   | N INFORMATION (A | LL FIELD  | S REQUIRED)  |                    |                     |  |
| Delivering Institution Name  |                  |           | CUID (CDN Securities)  |                    | DTC (US Securities) |  |
| Account Name   |                  |           | Contact Name   |                    |                     |  |
| Account Number   |                  |           | Contact Phone Number/Email   |                    |                     |  |
| RECEIVING INSTITUTION  | INFORMATION      |           |  |                    |                     |  |
| BMO Nesbitt Burns  |                  |           | Account No.  |                    |                     |  |
| CUID: NTDT (Cdn Securities)   DTC: 5043 (US Securities) Dealer/Rep Code: 9185/U2M  |                  |           | 81514576-14  |                    |                     |  |
| Mutual Fund Nominee Name: BMO Nesbitt Burns  |                  |           | BMO Contact: Christina Lee 604.595.0122 or christina.lee@nbpcd.com |                    |                     |  |