

## **Share Donation Transfer Form**

Donor Information:	
Donor Name:	
Address:	
Telephone: Email Address:	
Details of Donated Shares:	
Description of Shares:	
CUSIP Number:	# of Shares:
Name of person you may be sponsoring: Address:	
Do you, the donor, give permission for TFF to re you are sponsoring?  Quare Sponsoring?	lease the dollar value of your donation to the person
Delivering Institution:	
Institution Name:	Account #:
Address:	
FINS or DTC #:	
Contact Name: Co	ontact E-mail:
Contact Telephone:	Contact Fax:
Receiving Institution:	
Institution Name: Canaccord Genuity	
Account Name: The Terry Fox Foundation	Account #: 20N-711A-2
DTC #: <b>5046</b>	CUID #: CCAM
Contact Name: Liz Helmel	Contact E-mail: <u>helmel@cgf.com</u>
Contact Number: 604-643-7446	Contact Fax Number: 604-643-1817
The Terry Fox Foundation contact info:	
Contact Name: Shellbie Wilson	Contact E-mail: <a href="mailto:shellbie.wilson@terryfox.org">shellbie.wilson@terryfox.org</a>
Contact Number: 647-262-6871	
Authorization:	
I confirm that I have assigned ownership to The Terry Fordonated shares will be valued at their closing price as of issued for this amount, in accordance with Canada Reve	the date of the donation and a tax receipt will be
Signature: Date	e:
** Please submit the completed form to Liz Helr	

Foundation \*\*