

## **Share Donation Transfer Form**

Donor Information:	
Donor Name:	
Address:	
Telephone: Email Address:	
Details of Donated Shares:	
Description of Shares:	
CUSIP Number:	# of Shares:
Address:	Email:
Do you, the donor, give permission for TFF t you are sponsoring? □ Yes □No	to release the dollar value of your donation to the person
Delivering Institution:	
Institution Name:	Account #:
FINS or DTC #:	
	Contact 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: Amy Haines	Contact E-mail: amy.haines@terryfox.org
Contact Number: 604-245-0146	
Authorization:	
	ry Fox Foundation. I understand that upon receipt, the as of the date of the donation and a tax receipt will be Revenue Agency's tax receipting guidelines.
Signature:	Date:

\*\* Please submit the completed form to Liz Helmel at Canaccord Genuity and to The Terry Fox

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