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: _____ Email: _____

Address:_____

Do you, the donor, give permission for TFF to release the dollar value of your donation to the person you are sponsoring? ☐ Yes ☐No

Delivering Institution:

Institution Name: _____ Account #: _____

Address: _____

FINS or DTC #: _____

Contact Name: _____ Contact E-mail: _____

Contact Telephone: _____ Contact Fax: _____

Receiving Institution:

Institution Name: **Canaccord Genuity**

Account Name: **The Terry Fox Foundation**

Account #: **20N-711A-2**

DTC #: **5046**

CUID #: **CCAM**

Contact Name: Liz Helmel

Contact E-mail: lhelmel@cgf.com

Contact Number: 604-643-7446

Contact Fax Number: 604-643-1817

The Terry Fox Foundation contact info:

Contact Name: Frances Logue

Contact E-mail: frances.logue@terryfox.org

Contact Number: 437-562-1264

Authorization:

I confirm that I have assigned ownership to The Terry Fox Foundation. I understand that upon receipt, the donated shares will be valued at their closing price as of the date of the donation and a tax receipt will be issued for this amount, in accordance with Canada Revenue Agency's tax receipting guidelines.

Signature: _____ Date: _____

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