



## Gift of Securities

### Donor Information:

Donor Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

This form authorizes the transfer of the following securities to Evergreen Hospice.

\_\_\_\_ units of \_\_\_\_\_, \_\_\_\_\_  
(no.) (name of the security) CUSIP number

\_\_\_\_ units of \_\_\_\_\_, \_\_\_\_\_  
(no.) (name of the security) CUSIP number

\_\_\_\_ units of \_\_\_\_\_, \_\_\_\_\_  
(no.) (name of the security) CUSIP number

### Securities Being Transferred From:

Name of Donor's Broker/Institution: \_\_\_\_\_

Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_

### Securities Being Transferred To:

Account # **415-09171-20**  
CIBC Wood Gundy Inc.  
200-100 Simcoe St., Toronto  
Contact: Lira Lamaca  
Telephone: (416) 594-7955  
Fax: (416-594-7951)  
Email: [lira.lamaca@cibc.ca](mailto:lira.lamaca@cibc.ca)

FINS: T079  
DTC: 5030  
CUID: WGDB  
Euroclear: 10034  
Dealer #: 9280  
Rep Code: SZA

Donor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please fax or email this form to the Donor's Broker **and** to Lerryn Pitcher at Evergreen Hospice,  
F: (905) 472-4128, [lpitcher@evgcares.org](mailto:lpitcher@evgcares.org)