Hotel Dieu Shaver Health and Rehabilitation Foundation

541 Glenridge Avenue, St. Catharines, Ontario L2T 4C2 Tel. (905) 685-1381 Ext 84216 Canada Revenue Agency Charitable Number: 88931-7590-RR0002

GIFTS OF STOCK/MUTUAL FUNDS TRANSFER FORM

Province:	Postal Code:	Phone:()
Please accept this letter as auth	norization to transfer:	
Number of Shares/Units:	of <i>Name of</i>	Stock/Fund:
as a charitable donation to the	Hotel Dieu Shaver Healt	h & Rehabilitation Foundation
(optional:) Program:	Equip	ment:
Name on Account: Name of Investment Firm: Address of Investment Firm:_ Province:		
Name of Investment Advisor:	1 0stat Coue	<i>I none.</i> ()
<u>Please transfer the shares to:</u>		ration
	33 Queen Street	
	St. Catharines, ON	
	L2R 5G4	
Account Number: 4JJZWDE	CUID Code: NBCS	DTC: 5008 FINS#: T080
		ation Foundation

Investment Advisor: Mr. Leo Bonomi Email: leo.bonomi@ipcsecurities.com Phone: (905) 682-5230 or 1-877-755-5230 Fax: (905) 682-9034

As the donor of the shares/mutual funds specified above, I understand that the value of this gift of stock/mutual funds is determined by the closing price of the shares/mutual funds on the day that they are received into the account of the Hotel Dieu Shaver Health & Rehabilitation Foundation and that I will receive a charitable donation receipt for that amount.

Signature of Donor:	Date:
Signature of Donor:	Date:
(if jointly held)	

INSTRUCTIONS

Send one completed copy of this form to your broker, a copy to IPC Securities at the above address and a third copy to Hotel Dieu Shaver Health and Rehabilitation Foundation.