

Donation of Securities Approval Form

GENERAL INSTRUCTIONS

IMPORTANT: To avoid delays in processing transfers of securities, please (1) Fax or email this form to York University (Attn: Lisa Gleva, Executive Director, Principal Giving & Donor Relations AND Marisa Barlas, Sr. Development Officer, Gift Planning), prior to your broker making the transfer, and (2) Deliver original to your broker to initiate. Please do not send this form directly to HollisWealth; HollisWealth may act only on York University's direction.

York University Fax: (416) 650 - 8220

Email: gleval@yorku.ca and barlas@yorku.ca

DONOR INFORMAT	ION							
Donor Name:	Plea	Please designate my gift to:						
Name of Owner of Securities	s if Different From	the Donor:						
Address:								
City:				Province:		Pos	stal Code:	
Telephone:		Ext:	Fax:		Email:			
DESCRIPTION OF	SECURIT	Y						
Type: Publicly Listed St	tock Bor	nds	Debentures Other	(Please Specify)				
Quantity:		Name of Sec	urity:					
CUSIP /Symbol (for Electron	nic Transfer):		CUID # (If Bonds):			CODE CTRA	(If Government Bonds	
Reference/Account #::				FINS	S #::			
BROKER INFORMA	TION (Name o	f Broker, Agent,	or Custodian who will E	ffect the Transfer)				
Firm:	Contact:							
Telephone:	ephone: Ext: Fax:				Email:			
AUTHORIZATION								
Signature:				Date:				
(of Security Owner								
TRANSFER INSTRU	JCTIONS – F	OR USE B	BROKER ONL	Υ				
NOTE: Electronic	transfer is	preferred fo	or the delivery o	f securities.	To send s	ecurities	electronically, sy	ystem specifications
must be set up by	the sender	and the red	ceiver. The brok	er or transfe	r agent sh	ould make	e the transfer as	follows:
HollisWealth Suite 106 – 3950 14th	Δναημα							
Markham, ON L3R 0A								
Attention: Raymond Choo Tel: (416) 410-4098			10-4098	Fax: (416) 848-0728				
	11-11-14-14	. 141.		7000		ONE7		
Receiving Institution:	HollisWea		Dealer:	7923 38-DFSM-A		SN57 NBCS	DTO# ENDO	
Name of Account: BN/Registration Number:			Account#:	30-DL9IA	. CUID#	: NDC3	DTC#: <u>5008</u>	
DIV/Negistration Number.	11930 07	<u>JO ININOUU I</u>	ı					
								firm receipt, determine closing fair
								eration to constraints including thority is required to proceed. This
form has been duly received	by York Universit	by Division of Adv	ancement and forward	ed to HollisWealth	INITIALI FD:	Ť		•