



# ELDERCARE FOUNDATION

## GIFT OF SECURITIES TO ELDERCARE FOUNDATION OF VANCOUVER ISLAND

Please complete this form and forward to your broker/custodian/investment representative/financial institution for processing. Upon receipt of this form, it is asked that broker/custodian/investment representative/financial institution processing delivery submit a copy to the Eldercare Foundation of Vancouver Island so that we may notify our custodian of the impending transfer:

**Email: [donations@EldercareFoundation.org](mailto:donations@EldercareFoundation.org) or Fax: 250-519-5321 Attn: Cassie Holcomb**

### **Donor Information:**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

I would like to receive an emailed receipt

I would like my gift to be anonymous

### **Broker Information and Donor Authorization:**

**Client Account #** \_\_\_\_\_

Name of Broker: \_\_\_\_\_ Firm & CUID \_\_\_\_\_

Broker's Phone #: \_\_\_\_\_ Fax: \_\_\_\_\_ Date of Transfer: \_\_\_\_\_

Name of security(s): (i) \_\_\_\_\_ No. of shares: (i) \_\_\_\_\_

(ii) \_\_\_\_\_ (ii) \_\_\_\_\_

CUSIP \_\_\_\_\_

Description an class of securities (i) \_\_\_\_\_  
(common, preferred, etc.):

(ii) \_\_\_\_\_

This gift is made in support of:

- Area of Greatest Need/Unrestricted
- Equipment
- Other \_\_\_\_\_

I wish to make a charitable gift consisting of listed securities to Eldercare Foundation of Vancouver Island. Further to this, please accept this form as my authorization for you to transfer in-kind, the above listed securities from my brokerage account to the Eldercare Foundation of Vancouver Island's custody account held at Scotiatrust (trade settlement details below). It is my understanding that this transfer and gifting represents a disposition for which I will be provided with a donation receipt from Eldercare Foundation of Vancouver Island. The amount of the receipt will be based on the value as of the close of trading on the date they are received by Eldercare Foundation of Vancouver Island in our custody account.

Signature of Client: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_

### **Transfer Information for Eldercare Foundation of Vancouver Island:**

The custody account for Eldercare Foundation of Vancouver Island is held at Scotiatrust.

Scotiatrust  
510 – 650 West Georgia Street  
Vancouver, BC V6B 4N7

Account Number: 7806982414  
CDS FINS No: T525 / CUID – BNSC  
DTC Participant No: 4816 Inst/Agent ID No: 53440

If you have any questions or concerns, please contact [Eldercare Foundation via the contact information above.](#)