TILLSONBURG DISTRICT MEMORIAL HOSPITAL - FOUNDATION

Charitable Donation of Securities IN KIND

Please complete this form as authorization to the delivering institution to facilitate a timely transfer. Please ensure a copy of any necessary supporting documentation is attached, such as a Power of Attorney, if applicable. If delivering a physical certificate, please attach a copy of this form with the physical certificate (ensure power of attorney attached for processing).

PLEASE DELIVER A COPY OF THIS FORM TO YOUR DELIVERING INVESTMENT ADVISOR AND THE CONTACT AT SCOTIAMCLEOD

Delivering Institution Information
Name of Institution: _____
DTC# _____   FINS# _____CUID#_____
Account Name: _____
Account Number: _____
Contact Name: _____
Contact Phone Number: _____Email: _____

Receiving Institution Information
Name of Institution: ScotiaMcLeod, 40 King Street West, PO Box 4085, Station A, Scotia Plaza, Toronto ON M5W 2X6 Attn: Securities Transfer Dept.
FINS: T085   DTC#: 5011   CUID#: SCOT
Account Name: TILLSONBURG DISTRICT MEMORIAL HOSPITAL FOUNDATION
Account Number: 433-97271-1-9
Contact Name: ADAM MOLTNER (London, ON Branch 460)
Contact Phone Number: 519-660-3272 Email: adam.moltner@scotiawealth.com

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DIRECTION AND SIGNATURE

Please arrange to transfer the following securities to the TDMH Foundation as listed below:

Security Description: _____
(Shares/Units/Bonds) – if bonds, please include the interest rate and maturity.

Quantity: _____   **Additional Details:** _____

Contributor's Signature: _____ **Date:** _____

Name & Address for mailing of charitable receipt:
_____