

REQUEST FOR TRANSFER OF SECURITIES

DONOR INFORMATION

Donor Name:			
	(First Name, Middle Initial, Last Name)		
Address:			
	(Address, City, Province, Postal Code)		
Email Address:			Phone:
Please direct my gift to:			
University of Saskatchewan representative I have been working with (if applicable):			
This gift should b	be applied to my existing pledge:	Yes 🗌	No
I wish to remain	anonymous in relation to this gift:	Yes 🗌	No
BROKER INFOR	MATION		
Brokerage Firm:			Broker Name:
Email address:			Phone:
INSTRUCTION TO BROKER TO TRANSFER SECURITIES			
Please accept this form with my signature as your authorization to transfer the following shares to the University of Saskatchewan (charitable registration # 11927 9313 RR0001).			
(Donor account number) (Number of shares) (Name of shares - include the Market Symbol, Class, Type, and CUSIP number if known)			
The estimated value of the transfer is \$			
It is important that this transaction be completed no later than (YYYY-MM-DD)			
Donor signature			Date:
	JTION INSTRUCTIONS ard the original completed form to yo	ur broker.	
2. Please forwa	ard a copy of this completed form to o	one of our bro	kers listed below (select one):
FINS#: T009 Contact: Bon Email: bonn Phone: (306	nd Ave S, Saskatoon SK S7K 7E6 DTC#: 5043 CUID: NTDT nnie Guillou ie.guillou@nbpcd.com	2633	RBC Dominion Securities Suite 1400 – 333 7 th Ave SW, Calgary AB T2P 2Z1 FINS#: T002 DTC#: 5002 CUID: DOMA Contact: Dave Simpson Email: dave.simpson@rbc.com Phone: (403) 266-9615 Toll free: (800) 310-6484 University of Saskatchewan Acct#: 701-84049-18
3. Please forwa	Please forward a copy of this completed form to the University of Saskatchewan as follows:		

University Relations, Donation and Trust Services G15 Thorvaldson Building, 110 Science Pl, Saskatoon SK S7N 5C9 Email: ur_trusts@usask.ca Phone: 306-966-7834