Canadian Mental Health Association
Calgary
Mental health for all

Direction to Transfer Securities as A Gift Donation

Date: _____

To: _____ _____
Brokerage Firm Account Number

Address: _____

City: _____ Province: _____ Postal Code: _____

Please accept this as your authorization to electronically transfer the following securities representing a charitable gift from my account to:

RBC Dominion Securities Inc.
203, 14505 Bannister Road SE, Calgary, Alberta T2X 3J3

Account: 701-57771-18
Canadian Mental Health Association - Calgary Region

Dealer: 9190 **REP:** R8G **FINS:** T002 **CUID:** DOMA
DTC: 5002 **EUROCLEAR:** 90065

Contact: Brenda Johnston **Phone:** (403) 266-9611 **Fax:** (403) 299-6513

Number of Shares	Name of Security	CUSIP/Symbol

_____ _____
Date Signature of Donor

_____
Printed Name of Donor

#105, 1040 - 7 Ave. SW, Calgary AB T2P 3G9
ph: 403.297.1700 e: info@cmha.calgary.ab.ca f: 403.270.3066
www.cmha.calgary.ab.ca Registered Charity: 122013139RR0001