



WOODSTOCK HOSPITAL FOUNDATION

Notification of Gift of Securities to the Woodstock Hospital Foundation

I hereby notify the Woodstock Hospital Foundation of my intent to donate the following securities *(please print)*

Name _____

Street Address _____

City _____ Postal Code _____

Tel (C) _____ (H) _____

E-mail _____

Signature _____

By this signature, I confirm that I wish to donate the securities listed and have instructed my broker to effect the transfer above.

Donor's Broker Information:

Broker's Name: _____

Company Name: _____

Phone: _____ Fax: _____

E-mail: _____

Please mail, fax or deliver this form to:
Woodstock Hospital Foundation
310 Juliana Drive, Woodstock, ON N4V 0A4
foundation@woodstockhospital.ca
T: 519-421-4226 F: 519-421-4253



WOODSTOCK HOSPITAL FOUNDATION

Broker Transfer Notification

Broker's Name: _____

Company Name: _____

Tel _____

E-mail _____

I hereby authorize the transfer of the following securities:

From My Account Number: _____

Approximate Transfer Date: _____

Transfer to: The Woodstock Hospital Foundation
C/o CIBC Wood Gundy Account # 448 01403 10
Rep Code: 9280/ERH
CUID Code: WGDB
DCT Code: 5030

412 Dundas Street
Woodstock, ON N4S 1B9
Telephone: 519-421-1197 Fax: 519-421-1334

Date: _____

Signature: _____