



Donation of Shares

LETTER OF AUTHORIZATION FROM DONOR TO BROKER

To transfer securities to The Neighbourhood Group Foundation please complete this form and fax a copy to your Broker. Please provide us with a copy of this form as well.

By signing this form you authorize the foundation, or its agent, to contact your broker to complete the requested donation by transferring the securities outlined in section C to CIBC Trust.

A. DONOR INFORMATION

NAME _____			
ADDRESS _____	CITY _____	PROVINCE _____	POSTAL CODE _____
DAYTIME TELEPHONE _____		EMAIL _____	
DONOR'S SIGNATURE (REQUIRED) _____		DATE _____	

B. INFORMATION ABOUT YOUR BROKER

BROKER'S NAME _____	FINANCIAL INSTITUTION _____
BROKER'S TELEPHONE NUMBER _____	BROKER'S EMAIL _____
NAME ON ACCOUNT _____	ACCOUNT NUMBER _____

C. DESCRIPTION OF YOUR SECURITIES TO BE DONATED

NUMBER OF SHARES _____	NAME OF SECURITY _____
CUSIP# _____	EXPECTED DATE OF TRANSFER _____

D. RECEIVING ACCOUNT INFORMATION/TRANSFER INSTRUCTIONS TO THE FOUNDATIONS BANK/BROKER

To whom it may concern, please accept this as my authorization for the assets outlined in part C to be transferred in-kind for donation from the account listed in part B to the foundations bank/broker account listed below for further credit to CPIC account # 53451

INSTITUTION	Account	CUID/DCS	DTC	EUROCLEAR
CIBC TRUST	CTSF1111002	COMO	954	91770 (Boston Safe Deposit Trust)

Brokers: Please direct all inquiries to:
CIBC Investment Counselor: Valerie Small, Valerie.Small@CIBC.com
CIBC Investment Associate: Sani Kharbanda, Sanidhey.Kharbanda@CIBC.com