



Letter of Direction and Authorization for Gifts of Publicly Traded Securities / Mutual funds

DONOR INFOR	MATION		
Name of Donor(s	):		
Address:			
EMAIL:		PHONE NUMBER	:
ACCOUNT NUMBER	:		
BROKER NAME:		BROKER PHONE:	
NAME OF SECURITY	:		
Number of Shares:		ADP OR CUSIP:	
DESIGNATION FOR I	DONATION (IF ANY):		
RECIPIENT INFOR	MATION		
BROKER A/C:	SCOTIAMCLEOD T085 5011		
CONTACT PERSON:	CHU-YEE SO CHUYEE.SO@SCOTIAWEALTH.COM	PHONE: (416) 865-6412	FAX: (416) 863-7663
DONOR AUTHO	DRIZATION		
I hereby irrevocab ScotiaMcLeod.	ly authorize the transfer of shares	from my account to the acc	count of Toronto Botanical Garden at
Signature of Donor(s):			Date:
Signature of Donor(s):			Date: