WICWC.ORG

Procedures for the donation of shares

Thank you for choosing the donate to the WICWC. To process the transaction, the following information is necessary.

Securities to be transferred from

First name _____ **Last name**_____

Telephone_____**Email**_____

Address_____ **City/Town**_____ **Province** ____**Postal Code**____

Broker's Name _____ **Financial Institution**_____

Donor's account no._____

Broker's complete address_____

Broker's phone no._____ **Email**_____

Type of securities to be transferred in kind

Number of Shares_____ **Name of Security**_____

Security# _____ **Approximate Date of Transfer**_____

Securities to be transferred to the account of

West Island Cancer Wellness Center
Account no.: 11-ZH63-A
National Bank Financial
Account transfer management
800 rue Saint-Jacques, office 55721
Montréal, QC H3C 1A3
CUID: BNCS TCD: 5008

Please send this information to

Michelina Perrotta, Finance Coordinator
West Island Cancer Wellness Centre
115 du Barry, Kirkland, QC H9H 0C4
dons@wicwc.org

Rory Bertrand
La Financière Banque Nationale
1 Place Ville-Marie, Bureau 1700, Mtl QC H3B 2C1
rory.bertrand@bnc.ca

Thank you for your contribution, your tax receipt will be sent.

Signature of donor_____ **Date**_____