This form is to be completed by the Donor and serves as authorization and instruction to transfer specified securities to the **George R. Gardiner Museum of Ceramic Art (Gardiner Museum**).

Please email a copy of this form to the following recipients:

**Gardiner Museum**

Attn: Rocco Saverino Tel: (416) 408-5077 [rocco@gardinermuseum.on.ca](mailto:rocco@gardinermuseum.on.ca)

**Gardiner Museum**

Copy to: Miranda Disney Tel: (416) 408-5051 [miranda@gardinermuseum.on.ca](mailto:miranda@gardinermuseum.on.ca)

Please transfer the following securities in-kind:

**Stock and Bond Donations:**

|  |  |  |
| --- | --- | --- |
| CUSIP | Description | Units/Shares |
|  |  |  |

**Mutual Fund Donations:**

|  |  |  |
| --- | --- | --- |
| Fund Code | Description | Units |
|  |  |  |

**Delivering Institution Information: Receiving Institution Information:**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | **Stocks and Bonds**  BMO InvestorLine  CUID: NTDT  DTC# 5043  Dealer#: 9185  Credit Account: 235-77309-16 | **Mutual Funds**  BMO InvestorLine  CUID: NTDT  DTC#: 5043  FINS# T009  Dealer#: 9185  Credit Account: 235-77309-16 |
| Name of Institution: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Account Name: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Account Number: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Contact Name: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Contact Number: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Purpose of donation (please check):**

🗆 Gardiner Friendship 🗆 Exhibitions 🗆 Education 🗆 Endowment 🗆 Capital Campaign

🗆 Other (please specify):

**Donor Information:**

Name:                                                                            Telephone:

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Signature:                                                                        Date: