

TRANSFER INSTRUCTIONS

1. Please complete both pages of this form, ensure that it is signed and fax it to the attention of Planned Giving Officer at (403) 943-8877*. Once The Prostate Cancer Foundation is in receipt of this form and had approved the acceptance of shares, you will be contacted and provided with our brokerage information.
2. Contact and fax a copy of this form to your broker and advise of your intent to transfer securities to The Prostate Cancer Foundation.** Once the shares have been received in the Prostate Cancer Foundation brokerage account, a representative will contact you to advise you of the value of your gift. You will receive a charitable tax receipt for that same account***.

Ms.
 Mrs.
 Mr.
 Dr.
 Female
 Male

First Name	Initial (s)	Last Name
Home Address	City/Province	
Home Phone	Home E-mail	
Workplace (if applicable)		
Work Address	Work E-mail	
Work Phone	Ext.	
Financial Advisor	Advisor's Phone	
Security Name	Symbol	
Number of Transferred Shares		
Delivering Institution	Donor Account #	

In order to receive a charitable tax receipt for 2011, we require the following no later than December 17, 2011:

- Your signed Gift of Securities in the Prostate Cancer Foundation's possession, and
- Transfer of shares into our Prostate Cancer Foundation brokerage account

The Prostate Cancer Foundation is a Registered Charitable Organization Business Number: 89726123 RR0001

Signature

Date

Page 1 of 2 (over)

*Any gift planning should be done in consultation with your financial or tax advisor

** Restrictions apply. To download the complete Gift of Securities policy visit www.prostatecalgary.com

*** Receipt amount will be based on the closing price of the stock on the day it is received in the Prostate Cancer Foundation's account. Exceptions may apply
Acceptance of shares is at sole discretion of the Prostate Cancer Foundation.

Decide how to contribute

A. I want my donation to have the strongest impact possible. Please give my gift to the Prostate Cancer Foundation where it is needed most. _____%

B. I want to support the following Prostate Cancer Foundation investment areas:

Awareness: _____%

Community presentations and Man Van

Centre Operating Costs _____%

Research:

Planning for future generations _____%

May we recognize your generous donation in our recognition publication?

Yes No If yes please print name(s) as you would like it to appear in published materials

Name (s) _____

Donor Privacy- We value your trust and are committed to protecting the privacy of your personal information. The information you provide will be used to assist in the administration and acknowledgement of your gift, to communicate with you and to fulfill your information requests. We do not release donor names.

