SECURITIES DONATION FORM

Pacific Opera Victoria Association

THERE ARE TWO STEPS TO MAKE YOUR DONATION OF SECURITIES.

1. **Direct your broker to transfer securities in kind to RBC Dominion Securities**.
   This completed form will provide your broker with the information needed to initiate the electronic transfer.
2. **Please inform Pacific Opera Victoria of the pending share transfer** by forwarding a copy of the completed, signed form
   By mail to 925 Balmoral Rd., Victoria, BC V8T 1A7
   or by email to development@pacificopera.ca

PLEASE TRANSFER THE FOLLOWING SECURITIES IN KIND:

Investment Description: _____

Symbol and/or Certificate Number or Policy Number: _____

Quantity of Units / Shares: _____ Approximate Market Value: $ _____

DONATION TO
PACIFIC OPERA VICTORIA
c/o RBC Dominion Securities
277 Front Street West, 8th Floor
Account Transfer Department
Toronto, Ontario M5V 2X4

Account Number:	851-36989-13
CUID#:	DOMA
DTC#:	5002
Euroclear:	90065
Dealer:	9190
REP Code:	V2S

THIS TRANSFER IS A CHARITABLE DONATION TO PACIFIC OPERA VICTORIA ASSOCIATION
Charitable Registration Number **11907 5547 RR0001**

IF YOU WISH TO SPEAK TO A REPRESENTATIVE OF PACIFIC OPERA VICTORIA, PLEASE CONTACT
Rebecca Marchand, Senior Development Officer Phone: 250-382-1641
Email: rebeccam@pacificopera.ca

FOR MORE INFORMATION, PLEASE CONTACT
Laurel Danyluk at RBC Dominion Securities
Phone: 250-356-4995 FAX: 250-356-4880
Or laurel.danyluk@rbc.com

Once Pacific Opera Victoria has received a copy of the signed Securities Donation Form and the shares have been transferred to our account, Pacific Opera Victoria will issue a charitable tax receipt for the value. Generally this will be based on the closing price on the day the donation is received.

DONATION FROM
DONOR'S NAME: _____

Address: _____

_____

Phone: _____

Email: _____

FINANCIAL INSTITUTION: _____

Account Number: _____

CUID: _____

DTC: _____

Euroclear: _____

Dealer: _____

REP Code: _____

_____
SIGNATURE(S) OF DONOR(S)

_____
PRINTED NAME(S) OF DONOR(S)

_____
DATE SIGNED

Complete this section if it is important that this transaction be completed on or by a specific date.
Please complete this transfer by _____

The Donor's name is required for a tax receipt, but will not be publicly acknowledged if anonymity is requested. **I wish to remain Anonymous** ❑