



UNIVERSITY OF OTTAWA
HEART INSTITUTE
INSTITUT DE CARDIOLOGIE
DE L'UNIVERSITÉ D'OTTAWA

FOUNDATION
FONDATION

Bringing the Future Closer

MUTUAL FUND TRANSFER REQUEST

SECTION 1: (TO BE COMPLETED BY DONOR)

Donor Name _____ Donor Brokerage Account _____

Broker Firm _____ Broker Phone _____

Broker Address _____ Broker Fax _____

Broker Contact Name _____

TRANSFER INSTRUCTION: (Please use a separate form for each security)

Fund Name _____

Units _____ x Price per unit \$ _____ = Total Value \$ _____

Date of Transfer Request _____

PLEASE FAX FORM TO: Scotiabank - 1-866-343-1158

PLEASE FAX COPY TO: University of Ottawa Heart Institute Foundation, Finance – Mr. David Bennet
Fax: 613.696.7174 Phone 613.696.7264

SECTION 2: (FOR ACTION BY BROKER)

Transfer To **Scotiabank**

Electronic Share **Canadian/US Securities:** **Dealer/Rep Code: 9155, Intermediary BNSG**

Transfer **FINS #T525, CUID BNSC DTC 4816**

Transfer To **Scotiabank**

Beneficiary Account # 7804880719

in the name of University of Ottawa Heart Institute Foundation

PLEASE EMAIL OR FAX TO THE FOLLOWING RECIPIENTS INCLUDING YOUR BROKER:

University of Ottawa Heart Institute Foundation
Attention: Mr. David Bennet - Finance
40 Ruskin Street RM 2406
Ottawa, ON, K1Y 4W7
Phone 613-696-7264
Fax 613-696-7174
dbennet@ottawaheart.ca

1832 Asset Management LP
Attention: Kinga Kaczorowska
1 Adelaide Street, 8th Floor,
Toronto, ON M5C 2V9
Phone: 416-365-5174
Fax: 416-365-5000
kinga.kaczorowska@1832.ca

Donor Signature _____ Date _____

Note: Securities may be returned to transferring institution if a copy of this letter has not been faxed to Scotiabank. Failure to provide sufficient details on this letter may also result in failure to settle.