

## NON AUTOMATED STOCK DONATION INITIATION REQUEST

Date:	- ("Donor")
Donor Name:  Donor Email:	("Donor")
Donor Home Address:	<del></del>
Donor Phone:	
shares of stock	that the Donor named above would like to transfer from the on to the following Stock Donator Member Organization:
<b>OPTION 1</b> :□ Donor will separately re	equest that Donor's brokerage firm initiate the transfer to the Stock
Donator Member Organization account	listed in Section I below, <i>OR</i>
listed below in <b>Section II</b> to the Stock hereby represents that Donor is author	t Stock Donator initiate the transfer for the Donor from the account Donator Member Organization account listed in <b>Section I</b> . Donor orized to, and is requesting their brokerage firm listed below in f the shares of stock listed above to the Organization's brokerage
I. The stocks should be transferred to	o the following account:
Brokerage Services DTC#:	0164 Code 40
Brokerage Firm:	Charles Schwab
Account Name:	Stock Donator Inc.
Account Number:	5919-7619
Address: 1900 Ave. of the Star Phone: (310) 712-3850	rs, Suite #101; Los Angeles CA 90067
II The transfer will be sent from (Or	aly fill this part out if you selected "OPTION 2" above):
(A) Account Information	uy fut this part out if you selected Of 1101v 2 above).
Account Name / Title:	
Account Number:	
(B) Brokerage Information:	
Firm Name:	
Address:	
Phone:	
Fax:	<del></del>
Please notify communications@stockd	onator.com if you need help to initiate the transfer.
Donor Signature:	
Donor Name:	
Donor Name.	<del></del>

When complete email to: communications@stockdonator.com or fax to: (310)382-2086.