

## Process to transfer public securities electronically to Arthritis Research Canada

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### **STEP 1:**

Complete the Share Transfer Form (attached) and submit, prior to transfer – by email, fax or regular mail to;

Patti Nakatsu

Director of Development

Arthritis Research Canada 230-2238 Yukon Street | Vancouver, BC V5Y 3P2 Canada

**Email:** [pnakatsu@arthritisresearch.ca](mailto:pnakatsu@arthritisresearch.ca) **Fax:** 604-207-4059 **Tel:** 604-207-4002 **Toll-free:** 1-855-750-0400

*(Please note: Arthritis Research Canada's account is registered as Arthritis Research Centre Society of Canada)*

### **STEP 2:**

Please complete the Letter of Authorization, addressed to your broker (sample attached). This authorizes the electronic transfer into the Arthritis Research Centre Society of Canada's brokerage account. Return the Letter of Authorization to your broker so that they may initiate the Transfer of Shares to Arthritis Research Canada.

### **ARTHRITIS RESEARCH CANADA'S BROKER:**

**RBC Dominion Securities | Milau Private Wealth Management Group**

400 – 2626 Croydon Drive. Surrey, BC V3Z 0S8

### **CONTACTS:**

**Ibrahim Alawamleh, Associate Advisor**

**Email:** [ibrahim.alawamleh@rbc.com](mailto:ibrahim.alawamleh@rbc.com) **Tel.** 604-535-3813 | **Fax.** 604-531-4586

**Nick Milau, Vice President, Portfolio Manager & Financial Planner**

**Email:** [nick.milau@rbc.com](mailto:nick.milau@rbc.com) | **Tel:** 604-535-3825 | **Fax:** 604-531-4586 | **Toll Free:** 1-800-663-4664

Please note: If you have hardcopy share certificates, please contact Patti Nakatsu at Arthritis Research Canada for further instructions.

### **STEP 3:**

Arthritis Research Canada will issue a tax receipt that reflects the closing price of the shares on the date of transfer. This is the date the shares arrive in Arthritis Research Canada's brokerage account.

## SHARE TRANSFER FORM

In order to ensure your transaction is handled smoothly and efficiently, please submit this completed form, prior to the transfer — by email, fax or regular mail to:

**Patti Nakatsu**

Director of Development

Arthritis Research Canada

230 – 2238 Yukon Street Vancouver, BC Canada V5Y 3P2

Email: [pnakatsu@arthritisresearch.ca](mailto:pnakatsu@arthritisresearch.ca) Fax: 604-207-4059 Tel: 604-207-4002 Toll-free: 1-855-750-0400

*(Please note: Arthritis Research Canada's account is registered as Arthritis Research Centre Society of Canada)*

|   |                               |
|---|-------------------------------|
| Name:   | Telephone:                    |
| Address:  |                               |
| Broker's Name:  | Telephone:                    |
| Brokerage Firm:                                       |                               |
| Brokerage Account:                                    |                               |
| Name of Security:                                     |                               |
| Description of Shares: (e.g. common, preferred, etc.) |                               |
| Approximate value of each share: \$                   | Number of shares transferred: |

I understand that I will receive a gift-in-kind tax receipt for these securities from Arthritis Research Centre Society of Canada for the closing price, on the date these securities are received in Arthritis Research Canada's account. These securities have been donated to Arthritis Research Canada without restriction and can be sold by Arthritis Research Canada at any time considered appropriate.

Signature of Donor:

Date:

Arthritis Research Canada 230 – 2238 Yukon Street Vancouver, BC Canada V5Y 3P2

Toll-free: 1-855-750-0400 Fax: 604-207-4059

[arthritisresearch.ca](http://arthritisresearch.ca) | BN/Registration Number: 870758547 RR0001

**THANK YOU FOR MAKING ARTHRITIS RESEARCH A PRIORITY**

# LETTER OF AUTHORIZATION

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Date: \_\_\_\_\_

Broker's Name: \_\_\_\_\_

Broker's Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dear \_\_\_\_\_,

Please accept this letter as authorization to transfer the following shares to the Arthritis Research Centre Society of Canada, from my account # \_\_\_\_\_ .

Security Name: \_\_\_\_\_

Number of Shares: \_\_\_\_\_

**RECEIVING FIRM:** RBC Dominion Securities  
**NAME OF ACCOUNT:** Arthritis Research Centre Society of Canada  
**ACCOUNT NUMBER:** 384-04285-1-4  
**FINS:** T002  
**CUID:** DOMA

**CONTACT INFO:**

**RBC Dominion Securities | Milau Private Wealth Management Group**

400 – 2626 Croydon Drive. Surrey, BC V3Z 0S8

**Ibrahim Alawamleh, Associate Advisor**

**Email:** [ibrahim.alawamleh@rbc.com](mailto:ibrahim.alawamleh@rbc.com) | **Tel.** 604-535-3813 | **Fax.** 604-531-4586

**Nick Milau, Vice President, Portfolio Manager & Financial Planner**

**Email:** [nick.milau@rbc.com](mailto:nick.milau@rbc.com) | **Tel:** 604-535-3825 | **Fax:** 604-531-4586 | **Toll Free:** 1-800-663-4664

Thank you for your attention to this matter.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_