

Electronic Transfer Authorization Form

This letter authorizes the transfer the listed securities from my account (listed below) to

Account Name:

Ameriprise Financial

For Further Credit to: Tim Griffith Memorial Foundation

Tax ID # 20-8747259

DTC #0756

Account #

Brokerage Information

Attention (Broker/Advisor Name): _____

Brokerage Firm: _____

Personal Information

Account #: _____

Account Owner(s) / Trustee(s): _____

Address: _____

City: _____

State: _____ Zip Code: _____ Country: _____

I hereby release my name and contact information so that I may receive a receipt from Tim Griffith Foundation.

Securities Information

Name of Security / TICKER

Number of Shares/ Bond Face Value

Signed (Donor/trustee) _____ **Date** _____

Signed (Donor/trustee) _____ **Date** _____