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**Section One – Instructions**

Please complete this form to make an Additional Contribution to an existing **Classic Charitable Gift Fund** (“Fund”) with an irrevocable contribution to the **Charitable Gift Funds Canada Foundation** (“CGFCF”). Please review the Charitable Gift Fund Program Guide (“Program Guide”) for information on asset types that can be contributed. By signing this Agreement, you acknowledge that you have received and reviewed the Program Guide, you understand its terms, it forms part of this Agreement and you intend to contribute to the Fund noted below. Please submit the original version of this form and any other applicable documents, to your Financial Advisor for processing.

If you are working directly with CGFCF and **NOT** through a Financial Advisor, then please send the documents to: Charitable Gift Funds Canada Foundation, 645 Gardiners Rd., Ste. 202, Kingston, ON K7M 8K2

Fund Information: *(the name of the Fund or the donor and the Fund ID number)*

Check whether this is:

- An **Additional Contribution by the original donor(s)** who established the Fund or the **Fund Successor(s)**.
  - \$ 250 - \$ 4,999 *(this will be added to existing investments)*
  - \$ 5,000 or more *(you may make new investment recommendations. See Section Five)*
- A **Third-Party Contribution**. If the person making the contribution is not a donor named in the agreement that established the Fund, then they are considered a third-party contributor. The minimum donation for this type of gift is \$250. *(Please complete Sections 2 and 3 only.)*

**Section Two – Third Party Donor Information**

I, the Third-party contributor, understand that any contribution, once accepted by the CGFCF, represents an irrevocable contribution to the above-named Fund and is not refundable to me. By signing this Agreement below, I acknowledge and direct the CGFCF to add my contribution to the Fund identified in this document. I further understand, while I will receive a donation receipt for my contribution, I do **not** obtain any advisory privileges with regard to grants or investments on this CGF. I did not receive anything in exchange for, or in consideration of, this contribution.

Corporation <i>(if applicable)</i> *		
Full Name <i>(including title Mr., Mrs., Ms., Dr., etc)</i>		
Mailing Address		
City	Province	Postal Code
Telephone <i>(Home)</i>	Telephone <i>(Business)</i>	
Fax	Email	
Signature:		

### Section Three – Description of Gifted Assets

#### Donation of Cash

I/We donate the following gift of cash to a Charitable Gift Fund

by cheque

*Your Financial Advisor will work with you to fund your contribution with a cheque. OR If you are working directly with CGFCF and not through a Financial Advisor, then make the cheque payable to Charitable Gift Funds Canada Foundation.*

by transfer/direct deposit from my account

*Your Financial Advisor will work with you to transfer your cash. OR Contact CGFCF to make arrangements, if you are NOT working with a Financial Advisor.*

#### Donation of Securities

I/We donate the following securities\* to establish a Charitable Gift Fund (min. \$25,000)

Security 1 (Name)	Ticker/Fund #	# of Shares/Units	Estimated Value \$
Security 2 (Name)	Ticker/Fund #	# of Shares/Units	Estimated Value \$
Security 3 (Name)	Ticker/Fund #	# of Shares/Units	Estimated Value \$
Security 4 (Name)	Ticker/Fund #	# of Shares/Units	Estimated Value \$

\* If more than four securities are being contributed, attach a list of same with the information requested above to this form.

### Section Four – Designation of Gifted Assets (Original Donors or Fund Successors Only)

I/We the Donor(s) would like the assets used to make an additional contribution to the Fund and direct that these assets be handled in one of the following ways:

None of the gift is immediately available for grant-making; **OR**

\_\_\_\_\_ % of the initial gift is available for grant-making.

**Note:** Assets identified for grant-making purposes, will be held by the CGFCF in a centralized account. These monies are not allocated any portion of the CGFCF's operating costs and will not earn any additional income for the Fund. Designated amounts over 5% of the gifted assets may be subject to a four (4) month hold or a transaction fee before they are available for disbursement at the discretion of CGFCF.

### Section Five – Recommend Investment Vehicle(s) (Original Donors or Fund Successors Only)

Please see and complete **Schedule 1** attached to the end of this form for investment choices if different from those already on file.

### Section Six – Authorizations & Understandings (Original Donors or Fund Successors Only)

The **CGFCF** is a registered charitable organization (BN # 89671 3500 RR0001) in Canada and is governed by the terms and/or conditions contained in the **Program Guide**.

By signing this form, I/we authorize and direct the CGFCF to make an additional contribution to the Fund with the gifted property described in **Section Three** as per the designation in **Section Four** of this form.

I/We understand that this contribution made to the CGFCF is an **irrevocable** gift that is not refundable to me/us for any reason. I/We also understand that I/we will be entitled to a donation receipt for the fair market value of the contribution. Once contributions have been accepted, they are the property of the CGFCF, which is governed by an independent board of directors.

The CGFCF may use the personal information I/we have and/or will provide (for example name, address, contact information, donation history) to process my/our donations; administer its charitable services; verify my identity and protect against fraud; to satisfy regulatory obligations and other legal requirements.

In providing its charitable services, I/we understand that the CGFCF may have to share my/our personal information with other persons: where other parties are the CGFCF's third party service providers, suppliers or agents who assist the CGFCF in providing its services; and where it is required or permitted to do so by law.

To the best of my/our knowledge, all information disclosed is accurate, and I/we will immediately notify my Financial Advisor or the CGFCF if any changes occur. My/our signature(s) below evidence my/our agreement and acceptance of all terms, conditions and options selected in all parts of this Agreement and its attachments.

\_\_\_\_\_  
Original Donor's or Fund Successor's Signature(s)

\_\_\_\_\_  
Date

**Section Seven – To be completed by the Investment Advisor (If applicable)**

\_\_\_\_\_  
Investment Advisor Name

\_\_\_\_\_  
Rep #: Dealer #: Branch #:

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City Province Postal Code

\_\_\_\_\_  
Telephone Fax Email

**Investment Advisor's Primary Administrative Contact on this CGF:**

\_\_\_\_\_  
Assistant/Associate's Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Telephone Fax Email

**SCHEDULE 1 – Recommend Investment Vehicles for Gift Capital (Original Donors or Fund Successors Only)**

**PLEASE CHECK THE APPROPRIATE OPTION:**

**OPTION 1:** If a donor is **NOT** working with an Investment Advisor then the gift capital of the Charitable Gift Fund will be invested in: Charitable Gift Funds Canada Foundation Connor, Clark & Lunn Balanced Pooled Fund 100 %

**OPTION 2:** If a donor is working with an Investment Advisor and wishes to invest in a managed balanced portfolio, then please recommend investments for the enduring property assets of the Charitable Gift Fund in this section. **To a total of 100%:**

Direct Purchase & Managed Balanced Fund(s)\*

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

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

\* These recommendations are subject to review to insure their compliance with current CGFCF investment policies. Final acceptance of these recommendations rests with the CGFCF Board of Directors.

**OPTION 3:** If a donor is working with an Investment Advisor & wishes to invest in **Mutual Funds**, then please recommend investments for the enduring property assets of the Charitable Gift Fund from this section. **Select up to 4 funds, to a total of 100% - min. of 25% each:**

<input type="checkbox"/> AGF Canadian Balanced Fund (AGF280) _____%	<input type="checkbox"/> Mackenzie Balanced Fund (MFC436) _____%
<input type="checkbox"/> AGF Cdn Real Value Bal Fund (AGF783) _____%	<input type="checkbox"/> Mackenzie Univ Cdn Bal Fund (MFC724) _____%
<input type="checkbox"/> AIM Canadian Balanced Fund (AIM597) _____%	<input type="checkbox"/> Manulife Monthly High Income Fund (EPL583) _____%
<input type="checkbox"/> Axiom Balanced Income Portfolio (ATL975) _____%	<input type="checkbox"/> Meritas Balanced Portfolio Fund (SR1006) _____%
<input type="checkbox"/> Axiom Balanced Growth Portfolio (ATL986) _____%	<input type="checkbox"/> Meritas Monthly Div & Inc Fund (SR1007) _____%
<input type="checkbox"/> Bissett Cdn Balanced-A Fund (TML222) _____%	<input type="checkbox"/> RBC Balanced Fund (RBF272) _____%
<input type="checkbox"/> BMO Asset Allocation Fund (BMO145) _____%	<input type="checkbox"/> RBC Balanced Growth Fund (RBF553) _____%
<input type="checkbox"/> Caldwell Balanced Fund (CWF101) _____%	<input type="checkbox"/> RBC Advisor Select Bal Fund (RBF741) _____%
<input type="checkbox"/> CC&L Balanced Portfolio (CCL416) _____%	<input type="checkbox"/> Renaissance Cdn Balanced (TAL934) _____%
<input type="checkbox"/> CC&L Balanced Growth Portfolio (CCL419) _____%	<input type="checkbox"/> Saxon Balanced Fund-B (SAX645) _____%
<input type="checkbox"/> CC&L Growth Portfolio (CCL422) _____%	<input type="checkbox"/> Scotia Cdn Balanced Fund (BNS378) _____%
<input type="checkbox"/> CI Harbour Growth & Income (CIG691) _____%	<input type="checkbox"/> Scotia Selected Bal Inc & Growth (BNS341) _____%
<input type="checkbox"/> CIBC Balanced Fund (CIB477) _____%	<input type="checkbox"/> Standard Life Balanced-A Fund (SLM250) _____%
<input type="checkbox"/> Dynamic Value Balanced Fund (DYN9194) _____%	<input type="checkbox"/> TD Balanced Growth (TDB307) _____%
<input type="checkbox"/> Ethical Balanced (EFIO64) _____%	<input type="checkbox"/> Trimark Global Balanced Fund (AIM1773) _____%
<input type="checkbox"/> Fidelity Cdn Balanced-A Fund (FID282) _____%	<input type="checkbox"/> Trimark Select Balanced (AIM1573) _____%
<input type="checkbox"/> Fidelity Cdn Asset Allocation (FID281) _____%	
<input type="checkbox"/> GGOF Cdn Balanced (GGF580) _____%	
<input type="checkbox"/> HSBC Cdn Balanced (HKB3496) _____%	
	<b>TOTAL</b> <u>100</u>

These recommendations are subject to review to insure their compliance with current CGFCF investment policies. If you wish to recommend other funds or fund classes other than those listed here, contact CGFCF to have them reviewed for compliance with the Foundation's Policies and Procedures. Final acceptance of these recommendations rests with the CGFCF Board of Directors.