

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

**Darlene Currie**

Senior Philanthropic Advisor

**Tides Foundation**

PO Box 29903

The Presidio

San Francisco, CA 94129-0903

USA

Dear Darlene,

I have requested that \_\_\_\_\_ (#) shares (minimum value \$1,000) from \_\_\_\_\_ (Investment Co. Name) be gifted to your organization.

I understand that, upon receipt, it is your policy to sell these shares. Please direct these funds to your Tides Canada Exchange Fund (#1481) for your Cross-Border Service.

I wish to request that Tides Foundation make a grant recommendation to Tides Canada Foundation, in Vancouver, in favor of:

**Name of Charity:** Olive Branch Playground Builders Foundation

**Charity Address:** 8526 Buckhorn Dr. Whistler, B.C. Canada, V0N 1B8

**Charitable Number:** 85280019RR0001

**Name of Contact at Charity:** Keith Reynolds

**Contact Email Address:** keith@playgroundbuilders.org **Phone Number:** 604-313-5362

**Purpose:** Olive Branch Playground Builders Foundation

**Recognition (anonymous or by name):** \_\_\_\_\_

I certify that this recommendation is not intended to be used to satisfy a personal economic obligation or pledge made by the Donor, a Relative of any of the donor, or a Controlled Entity. I further certify that it is not intended to be used to make any loans, pay compensation, reimburse expenses, make any similar payments, or result in more than an incidental benefit to the Donor, any Relative of the Donor or any Controlled Entity. (Examples of grants that result in more than an incidental benefit include, but are not limited to, grants to purchase tickets for, or tables at, charitable events, and grants for membership in certain organizations.)

Should Tides Foundation decide to make a grant recommendation according to my request, I understand that Tides Foundation will retain an administrative fee of 2% (subject to change with notice) of my gift of shares. The remainder will be available for grant disbursal.

Thank you for considering this request.

Sincerely,

\_\_\_\_\_  
*Donor Name* *Donor Signature*

\_\_\_\_\_  
*Donor Address* *City* *State* *Zip Code*

\_\_\_\_\_  
*Donor Telephone* *Email Address*

## Contribution Transmittal Form

**How to prepare:** Before initiating a transfer of securities or bank wire to Tides Foundation, please complete and fax this form to (415) 561-6401, or mail to the address below. You or your financial representative must provide correct information prior to the transfer to avoid crediting delays and possible fluctuations in the trading price of the stock.

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**Fund Advisor(s):** \_\_\_\_\_

**Fund Name:** \_\_\_\_\_

### Contribution Type:

Wire Transfer in the amount of \$ \_\_\_\_\_

#### Wire Information

Bank Name: Wells Fargo Bank  
ABA#: 121000248  
Account Name: Tides Foundation – Depository Account  
Account #: 4518101969

Stock Transfer (*Securities transferred electronically to Wells Fargo Investments*)

#### Stock Transfer Information

Financial Institution: First Clearing, LLC  
DTC #: 141  
Account Name: Tides Foundation  
Account #: 87273-1505

#### Name of security

#### Number of shares

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Long Term Funds only:

Amount or % held in grant making account: \$ \_\_\_\_\_

Amount or % transferred to investment account: \$ \_\_\_\_\_

**Date contribution due to arrive at Tides Foundation:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

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

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

*If you have questions or need further information, contact Byron Miranda, Jr. Staff Accountant, (415) 561-6326.*