USE THIS FORM FOR MUTUAL FUNDS THAT ARE HELD AT A BROKERAGE FIRM

(COMPLETED FORM SHOULD BE GIVEN TO YOUR FINANCIAL ADVISOR FOR PROCESSING)

Date	:	_	
To:	(Name of your brokerage firm)		(Donor's name(s))
Re:	Account # at your brokerage fir	m:	
	In the name of:(Account title when	e shares are coming from)	
listed	d above as follows (please note e account): <u>Number of shares</u> <u>Symbo</u>	that the mutual fund can	below listed mutual fund(s) from our account be sent via ACAT (0671) <u>or</u> to our Merrill Lynch
	To Merrill Lynch: ACAT # 067 (Please call Katie Kelly at (916) 648-63		fund to obtain our House Account #.)
For further credit to: Account #: Name of:			
Chai	ritable gift is for the benefit of: (No	ame/location of Parish—Include a	ny specifics such as special projects, building or scholarship funds.)
Since	erely,		
(All ac	count holders or authorized signers of acco	ount must sign below to authorize	your brokerage firm to transfer the shares.)
X			
	count owner signature to authorize transf	fer) (Title if applicable, e.g	ı. Trustee)
X		,	
(Ac	count owner signature to authorize transf	fer) (Title if applicable, e.g	. Trustee)

Please send a copy of this completed letter by mail or fax to:

Katie Kelly Merrill Lynch 1435 River Park Dr., #100 Sacramento, CA 95815 Phone: (916) 648-6333 Fax: (916) 265-0090