

INSTRUCTIONS FOR TRANSFER OF STOCK/SECURITIES

Please download or print this form, fill it out completely and mail a copy to Office of Advancement, 1 Pharmacy Place, St. Louis, MO 63110 *OR* email to Giving@uhsp.edu.

I/We will transfer the following securities to University of Health Sciences and Pharmacy in St. Louis as a contribution.

_____ shares of _____ will be transferred on
(Number) (Name of stock/security)

_____ from the broker _____
(Date) (Name of firm)

I/We authorize the broker to disclose my/our name and to inform University of Health Sciences and Pharmacy in St. Louis that this transfer has been made.

UHSP BROKERAGE INFORMATION

Brokerage House:

Charles Schwab
P.O. Box 7368
San Francisco, CA 94120-9366
800.435.4000

Local Contact:

Charles Schwab & Co. Inc.
7700 Bonhomme Avenue, Suite 1001
Clayton, MO 63105
800.435.4000

Routing Instructions:

DTC Number: 0164
Tax ID Number: 43-0652675
FBO: Inform University of Health Sciences and Pharmacy in St. Louis / St. Louis College of Pharmacy
Account Number: 8411-3823

Name(s): _____

Date: _____