



Date: _____

Your Broker's Name
Brokerage Firm's Name
Brokerage Firm's Address
City, STATE Zip

Dear (Broker):

I, (donor's name), authorize you to transfer _____ (number of shares) of _____ (name and ticker of stock) from my account, _____ (brokerage account number). Please transfer these shares to the Down Syndrome Guild of Greater Kansas City (DSG). DSG's account information and transfer instructions are as follows:

- **DTC ELIGIBLE SECURITIES**

Participant #2170
Commerce Bank ID #26447
Commerce Bank Agent Bank number 26388
Account Name: Down Syndrome **Guild #690285036**

- **PHYSICAL CERTIFICATE
OVERNIGHT OR REGULAR MAIL**

The Commerce Trust Company
Attn: Amy Pieper
1000 Walnut Street, 16th Floor
Kansas City, MO 64106

Please designate for: **Down Syndrome Guild #690285036**

- **MUTUAL FUNDS**

Please contact Amy Pieper at 816-234-2883 to obtain registration instructions. Commerce Bank is NOT and ACATS Participant

- **CASH WIRE**

Commerce Trust Company
811 Main Street, 9th Floor
Kansas City, MO 64105-2005
ABA: 101000019
Credit Account: CTC Ops #1991400781
Further Credit: Down Syndrome **Guild #690285036**

If you have any questions about this transaction, call (donor's name) at (donor's phone number). Please designate if your donation is being made in honor or memory of someone or designated to a specific program/purpose.

Thank you for your prompt attention to this matter.

Sincerely,

(Donor's Name)

CC: Commerce Trust Company
Attn: Amy Pieper
1000 Walnut Street, 16th Floor
Kansas City, MO 64106

CC: Down Syndrome Guild
Attn: Amy Stoll
5960 Dearborn Street, Suite 100
Mission, KS 66202