



Electronic Transfer of Securities

DTC Instructions:

Credit: **Prisma Health**
Broker: **USBank**
Participant Number: **2803**
Agent Internal Number: **001050996344**

Thank you for making a gift of securities to the Prisma Health–Upstate. To allow us to thank you for your generous donation, and to provide you with the necessary documentation for income tax purposes, please provide us with the following information:

Name: _____

Address: _____

City _____ State _____ Zip _____

Phone: _____ Email: _____

Do you wish to remain anonymous? *(Circle one)* YES / NO

Restriction on gift (Endowment, Program, Service, etc.):

Company name of securities transferred: _____

Number of shares: _____ Approximate date of transfer _____

Name of sending broker/financial institution: _____

Sending institution primary contact information:

Name: _____

Email: _____ Phone: _____

Once you have completed the above information and transferred the securities, please email, or mail this form to:

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