



Kennesaw State University Foundation

Letter of Authorization to Broker

Date _____

Broker's Name _____

Company _____

Address _____

City, State, Zip _____

Dear _____,

Complete this form, print, sign and send to your broker. **Mail or fax a copy to KSUF.** See below for mailing/fax instructions.

Please accept this form as your authorization to transfer irrevocably the following securities as a gift to the Kennesaw State University Foundation:

Name of security _____

Number of shares _____

The Kennesaw State University Foundation prefers that the securities be electronically transferred to its account at **UBS Financial Services, Inc.**

DTC number: #0221
KSUF's Account Number: AX35304 70
Broker's Phone Number: (404) 760-3322 Van Price

Contact Peggie Hoffman, Director of Asset Management, Kennesaw State University Foundation, at (770) 499-3334 with any questions.

This gift is for the benefit of the following department, program, fund, or project:

Sincerely,

Signature

Account #

Name (Please Print)

Phone

cc: Kennesaw State University Foundation Mail to: **1000 Chastain Road, MD #9101
Kennesaw, GA 30144-5591**

Or Fax to: **(770) 499-3485**