



GIFT OF STOCK – INSTRUCTIONS & FORM

Thank you for making a gift of stock to the **Society of St. Vincent de Paul of Long Island** (hereafter *SVDPLI*). We greatly value the generosity of friends, donors, and all who help to sustain and enhance our programs and the costs associated with caring for our neighbors/those in need along with our conference outreach initiatives in the community. To ensure your gift is swiftly and accurately processed, please complete this form and return it to the attention of **Joseph Geraci, Director of Development** (see *contact info page two*).

Please provide OUR BROKERAGE information to your broker. Full DETAILS can be obtained upon initiation of this transaction:

RAYMOND JAMES & ASSOCIATES INC.*

***Address & Contact Information to be provided upon transaction exchange**

DTC Number: TO BE ADVISED

ACCT Name: Central Council of the Society of St. Vincent de Paul Equity

ACCT Number: TO BE ADVISED

EIN Number: 11-1884961

DONOR INFORMATION:

**Please provide us with the following information so that we can properly acknowledge your gift:*

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Telephone: _____

STOCKS GIFTED:

STOCK 1:

Date of Transfer: _____ Number of Shares: _____ Approx. Value: _____

Name of Security: _____ Stock Symbol: _____

STOCK 2:

Date of Transfer: _____ Number of Shares: _____ Approx. Value: _____

Name of Security: _____ Stock Symbol: _____

STOCK 3:

Date of Transfer: _____ Number of Shares: _____ Approx. Value: _____

Name of Security: _____ Stock Symbol: _____

Broker Name: _____

Broker Rep Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Telephone: _____

Please include if your gift is made:

In Honor of: _____ In

Memory of: _____

Other Acknowledgement: _____

If you would like SVDPLI to send an acknowledgement to the person(s) above to notify them of your gift, please provide the following information for each person (please attach additional sheets as needed):

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Telephone: _____

**SVDPLI safeguards the information of its donors and will never share your information with another organization.*

PLEASE SEND THIS FORM TO:

**The Society of St. Vincent de Paul of Long Island
Attn: Joseph Geraci, Director of Development
249 Broadway
Bethpage, NY 11714**

**Email: igeraci@svdpli.org
Phone: (516) 822-3132 x106**



THANK YOU FOR YOUR SUPPORT!

The Society of St. Vincent de Paul of Long Island is a tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code and is qualified for charitable contribution deductions.