

One Waverley Place London NW8 ONP

Stock transfer instructions

Donor name		
(Please print your nar	ne as you would like it to appear in s	school publications and acknowledgements.)
Signature		Date
Phone		Mobile
Email		
☐ Annual Fund	% or amount:	Is this a pledge payment?
□ Capital Giving	% or amount:	□Yes
☐ Endowment	% or amount:	□ No
☐ Other*	% or amount:	*Please specify
Stock Name		
Symbol	# Shares or approximate value	
Stock Name		
ymbol # Shares or approximate value		
Broker name		
Broker phone		Date stock transfer authorized
Special instructions		

Please return this form to Beth Crutcher, Director of Advancement

E beth_crutcher@asl.org

T +44 (0)20 7449 1260