



Electronic Transfer Authorization Form

Please transfer the listed securities from my account to the American Kidney Fund’s Raymond James & Associates Inc. account using the following information: **Raymond James & Associates Inc.**

DTC# 0725

For Further Credit to: American Kidney Fund

Tax ID # 23-7124261

Account # 568KU351

Broker: Lisa Mifsud at 833-991-1426 or

Lisa.Mifsud@RaymondJames.com

Your Brokerage Information

Broker’s Name: _____

Brokerage: _____

Personal Information

Account #: _____

Title: _____ Full Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____ Country: _____

I hereby release my name and contact information so that I may receive a receipt from the American Kidney Fund (AKF).

NOTE: If you choose not to release your name and contact information, AKF will not be able to provide you with a receipt for your gift.

Securities Information

Name of Security:

Number of Shares / Bond Face Value:

_____	_____
_____	_____
_____	_____
_____	_____

Signed (Donor): _____ **Date:** _____

Signed (Donor, Joint Owner): _____ **Date:** _____

**For any questions please contact Daniell Griffin at 1-800-638-8299 ext.7064
To submit this complete document please email: DGriffin@kidneyfund.org**