Donation Request

To: _____ (Transferring Institution)

_____ (Address of Transferring Institution)

_____

Re: _____ (Transferor/Donor)

_____ (Residential Address of Transferor/Donor)

Account # _____ (Account # of Transferor/Donor at Transferring Institution)

I authorize and direct the *transfer in kind* of the following securities from the above noted account to the Odlum Brown Limited account number noted below:

Security Description	CUSIP/ISIN/SEDOL#	# of shares/units

Deposit Securities to Odlum Brown Limited Account Number: 012-6218-7

Name of Account Holder: B C CIVIL LIBERTIES ASSOCIATION

Canada Revenue Agency Charity Registration Number: [888466844RC0001]

In order to process this transfer, please fax or forward this completed form to:

Odlum Brown Limited
1100-250 Howe Street
Vancouver BC V6C 3S9 Attention: [Campbell Craig]
Phone: 604-669-1600 Fax: 604-844-5413
CUID: OBLV DTC#. 5074 Mutual Fund Dealer #. 9195

_____ _____

Signature of Transferor/Donor Date