

Giving Fund Succession Instructions

Currently, you are the advisor of your GiveWise Giving Fund. In the event of your death or incapacity, there are two ways to divide the remaining assets in the Giving Fund: naming one or more successors or allocating funds to one or more charities. You may also choose a combination of these two options. Please ensure the combined Allocation assignments do not exceed 100%.

Please complete pages 1 and 2 of this form and email to support@givewise.ca. If the number of Successors or Charities exceeds the space available, please use additional space found on page 3 and 4 of this document.

1. Successor Advisor

You may elect one or more individuals to be the Successor Advisor of your Giving Fund. This can be a family or non-family. The fund assets will be distributed to a Giving Fund in the name of the Successor(s) based on the allocation described. You may allocate as many successors as you would like. If the number of Successors exceeds the space available, please use additional space found on page 3 of this document.

SUCCESSOR #1	
FULL NAME:	
EMAIL:	
ADDRESS:	
PHONE:	
RELATIONSHIP TO YOU:	
DATE OF BIRTH:	
% ALLOCATION:	

SUCCESSOR #2	
FULL NAME:	
EMAIL:	
ADDRESS:	
PHONE:	
RELATIONSHIP TO YOU:	
DATE OF BIRTH:	
% ALLOCATION:	

2. Fund Disposition

You may elect to terminate the Giving Fund with proceeds granted to one or more Registered Canadian Charities based on the allocation described. You may allocate as many charities as you would like. If the number of charities exceeds the space available, please use additional space found on page 4 of this document.

CHARITY #1	
CHARITY NAME:	
REGISTRATION #:	
DESIGNATION:	
% ALLOCATION:	

CHARITY #2	
CHARITY NAME:	
REGISTRATION #:	
DESIGNATION:	
% ALLOCATION:	

CHARITY #3	
CHARITY NAME:	
REGISTRATION #:	
DESIGNATION:	
% ALLOCATION:	

3. Authorization

FUND USER AUTHORIZATION	
USER NAME:	
GIVING FUND #:	
EMAIL ADDRESS:	
DATE OF BIRTH:	
SIGNATURE:	
DATE SIGNED:	

4. Additional Successor Advisors

SUCCESSOR #__	
FULL NAME:	
EMAIL:	
ADDRESS:	
PHONE:	
RELATIONSHIP TO YOU:	
DATE OF BIRTH:	
% ALLOCATION:	

SUCCESSOR #__	
FULL NAME:	
EMAIL:	
ADDRESS:	
PHONE:	
RELATIONSHIP TO YOU:	
DATE OF BIRTH:	
% ALLOCATION:	

SUCCESSOR #__	
FULL NAME:	
EMAIL:	
ADDRESS:	
PHONE:	
RELATIONSHIP TO YOU:	
DATE OF BIRTH:	
% ALLOCATION:	

5. Additional Fund Disposition

CHARITY #___	
CHARITY NAME:	
REGISTRATION #:	
DESIGNATION:	
% ALLOCATION:	

CHARITY #___	
CHARITY NAME:	
REGISTRATION #:	
DESIGNATION:	
% ALLOCATION:	

CHARITY #___	
CHARITY NAME:	
REGISTRATION #:	
DESIGNATION:	
% ALLOCATION:	

CHARITY #___	
CHARITY NAME:	
REGISTRATION #:	
DESIGNATION:	
% ALLOCATION:	

CHARITY #___	
CHARITY NAME:	
REGISTRATION #:	
DESIGNATION:	
% ALLOCATION:	