Specific Lot Identification Transfer Form

All transfer requests must be accompanied by a signature. If there are joint registrants, the signature of at least one account owner must be present. Upon completion of any transfer, you will receive a confirmation notice. If you have any questions or concerns regarding this form, please call us at 800-728-8762. For information, please visit www.saturna.com/costbasis

Mail or fax completed forms to: **Saturna Capital**
P.O. Box N
Bellingham, WA 98227-0596
F: 360-734-0755

Customer Information

Account Owner / Custodian / Trustee:

Social Security Number (Tax ID Number):

Joint Owner / Minor / Name of Trust:

Social Security Number (Tax ID Number):

Daytime Phone:

Work/Cellular Phone:

Evening Phone:

Email Address:

Please transfer the following shares:

Date of original purchase:	Number of shares to redeem:	Saturna account number(s):	Name or ticker of fund/security:

Transfer Instructions (please choose only one)

- ❍Transfer shares as a gift/donation
- ❍Transfer shares in kind (no change in beneficial owner)
- ❍Transfer shares per a decedent's estate distribution
- ❍Transfer shares per a divorce decree

to the following Saturna Capital fund account:

Account Number

Account Owner

Signature: _____ **Date:** _____

Joint Signature: _____ **Date:** _____