

## Letter of Authorization to Deliver through DTC Form

To whom it may concern:

| Please use this letter as authorization to delive | er, through DTC, the follow                      | ring securities: |
|---|--|------------------|
| Security name, symbol, or CUSIP                   | Share quantity                                   |                  |
| <u>a)</u>   |  |                  |
| <u>b)</u>   |  |                  |
| <u>c)</u>   |  | _                |
| <u>d)</u>   |  |                  |
|   |  |                  |
| Transferor's brokerage firm & account #           | Transferor's exact account name                  |                  |
| 238-185497-087                                    | Thomas Aquinas College                           |                  |
| The College's Morgan Stanley account #            | Morgan Stanley account name                      |                  |
| 0015 9665 V<br>Morgan Stanley DTC number          | Vilshire Blvd., Suite 600 Be<br>Morgan Stanley a |                  |
| John Privitelli, CFP                              | 310-285-4865                                     |                  |
| Senior Vice President, Wealth Advisor             | Morgan Stanley telephone contact                 |                  |
| I testify that my instructions on this form are   | true, accurate, and comple                       | te.              |
| Donor's name                                      | Signature  | Date             |
| Donor's name                                      | Signature  | Date             |
| Please send (email, fax, post)                    | this letter to your broker.                      |                  |
| Then contact your broker to confi                 | rm your instructions verba                       | ally.            |

If you have any questions about this form, please contact your broker or John Privitelli at Morgan Stanley.

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