

To:	The Manager TD Canada Trust	
This is t	to confirm that the undersigned is making a gift of \$	
To: AM	MANINDER SINGH HAJRAH	
Name(s): SIMRAT PANNU	Relationship: SISTER
		Relationship:
Property	v To Be Purchased:	
Street: 30 GOLDEN SPRINGS DRIVE		City: BRAMPTON
Prov.: ONTARIO		Postal Code: <u>L7A 4N4</u>
No part The mo	of the gift is being provided by any Third Party hav ney is a genuine gift and does not have to be repaid.	ring any interest (direct or indirect) in the sale of the subject property.
Given b	V:(Signature)	Received by:(Signature)
Addres	MA F. 13. 15. 57.5. 180.10.10.10.10.10.10.10.10.10.10.10.10.10	
	BRAMPTON, ONTARIO, L6X 4T2	
	416-910-8046 (Telephone Number)	
Date:	06/08/2020	
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Verifica	ation Of The Existence Of Gifted Funds	
Giftor e	an choose one of the options stated below to verify	sufficient assets to cover the amount of gift stated.
l) Bri or	ng this form to your Bank/Trust Company and have	them fill out the bottom of this form.
2) Atta	ach copies of bank book or statements of investmen	t confirming the amount of gifted funds to be given.
TD CA	NNADA TRUST	
	t Company Name)	Address (Branch Stamp)
	f Representative	(Inle)
Date: <u>0</u>	6/08/2020	<u> </u>

The above named individual has sufficient assets to cover the amount of gift stated.