



## Change of Address Form

### INSTRUCTIONS:

1. If you need assistance completing this form or to request additional forms, you can contact us at **1-800-582-6757**.
2. Please mail the completed application to **Domini Funds, P.O. Box 46707, Cincinnati, OH 45246-0707**.
3. For overnight delivery, mail to **Domini Funds, 225 Pictoria Drive, Suite 450, Cincinnati, OH 45246**.
4. A confirmation of this change of address will be sent to you at old and new address.
5. Within 30 days of the address change, for security purposes, redemption instructions must be in writing, with each signature accompanied by a medallion signature guarantee from a local financial institution.

**Domini Account Number(s):** \_\_\_\_\_

**Primary Account Holders:** \_\_\_\_\_

**Social Security Number/Tax Identification Number:** \_\_\_\_\_

**Joint Account Holder:** \_\_\_\_\_

**Social Security Number/Tax Identification Number:** \_\_\_\_\_

**Old Address:** \_\_\_\_\_

**New Address** \_\_\_\_\_

**Daytime Telephone Number:** (\_\_\_\_) \_\_\_\_\_ **Evening Telephone Number:** (\_\_\_\_) \_\_\_\_\_

**Email Address** \_\_\_\_\_

\_\_\_\_\_  
Signature of Owner, Custodian, Trustee or Corporate Officer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Joint Owner, Custodian, Trustee or Corporate Officer

\_\_\_\_\_  
Date