

Domini Impact Investments

P.O. Box 46707 Cincinnati, OH 45246-0707

Redemption Form

(*Not For Use with Retirement Accounts)

Account Number _____

Name _____

Social Security Number or Tax ID Number _____

Phone Number (Day/Evening) _____

Type of Redemption

(Check action requested)

Full Redemption

Partial Redemption (Please Specify Amounts)

Fund: _____ Dollars/Shares: _____

Fund: _____ Dollars/Shares: _____

Fund: _____ Dollars/Shares: _____

Fund: _____ Dollars/Shares: _____

Payment Method

(Check action requested)

Check – A check for the proceeds will be mailed to the address of record.

Special Address

Select this option to have the check mailed to a different address.
(Medallion Signature Guarantee required)

Address _____

City _____

State _____

Zip _____

