

Nonretirement Account Redemption



Complete this form to request a redemption from your *Wells Fargo Advantage Funds*® nonretirement account. If you have questions or would like help completing this form, call **1-800-222-8222**, 24 hours a day, 7 days a week.

P.O. Box 8266 | Boston, Massachusetts 02266
www.wellsfargo.com/advantagefunds

1 REGISTRATION AND MAILING ADDRESS (PLEASE PRINT)

Name of account owner, custodian, trustee (first, middle initial, last), or entity		Social Security/taxpayer ID number	
Name of joint owner, co-trustee, or minor (first, middle initial, last)		Social Security/taxpayer ID number	
U.S. residential street address	City	State	Zip code
U.S. mailing address (if different than U.S. residential street address)	City	State	Zip code
Daytime phone	Evening phone		

Note: If the address above is different from the address currently listed on our records, we will change all accounts under the Social Security/taxpayer ID number(s) listed above to reflect this new address. All future correspondence will be sent to the new address until you advise us otherwise. **Redemptions to a new address will require your signature to be Medallion Guaranteed if requested within 15 days of the address being changed.**

2 ACCOUNTS AND REDEMPTION AMOUNT

To request redemptions from additional accounts, include all information in this section on a separate sheet.

_____ Fund and account number	<input type="checkbox"/> Redeem the entire balance.
_____ Fund and account number	<input type="checkbox"/> Partial: \$ _____ or _____ shares
	<input type="checkbox"/> Redeem the entire balance.
	<input type="checkbox"/> Partial: \$ _____ or _____ shares

3 PAYMENT METHOD

Choose one:

- Mail a check payable to the account registration and mail it to the address listed in section 1 of this form.
- Mail a check payable to the account registration and mail it to the temporary address listed below. **A Medallion Guarantee is required in section 4 of this form.**

_____ Mailing address	_____ City	_____ State	_____ Zip code
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- Mail a check payable to a third party and mail it to the address listed below. **A Medallion Guarantee is required in section 4 of this form.**

_____ Name of individual or entity			
_____ Mailing address	_____ City	_____ State	_____ Zip code

- Invest this redemption in another *Wells Fargo Advantage Funds* account. **A Medallion Guarantee may be required in section 4 of this form.**

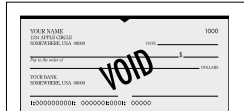
_____ Fund and account number (or write "New Account" if new)	_____ Account owner(s)
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* Note: If you are opening a new account, complete and submit a *Wells Fargo Advantage Funds* Account Application with this form.

- Send electronically via EFT to the bank account indicated on the attached voided check or the savings account listed below. **A Medallion Guarantee may be required in section 4 of this form.** I understand that the proceeds will normally arrive at my bank within two banking days and that this service is governed by the terms and conditions explained in the prospectus and rules of the Automated Clearing House (ACH).

- Checking (attach a voided check) Savings

_____ Name of bank	_____ ABA/routing number for ACH
_____ Bank account registration	_____ Bank account number



Include a voided check, if applicable, for the electronic funds transfer (EFT) or wire payment method to ensure accurate bank account information.

Note: Checks must be preprinted with your name and address. We cannot accept starter or counter checks.

3 PAYMENT METHOD (CONTINUED)

- Send via wire transfer to the bank account indicated on the attached voided check or the savings account listed below. A wire fee may be deducted from the account balance. **A Medallion Guarantee may be required in section 4 of this form.**
- Checking (attach a voided check) Savings

Name of bank	ABA/routing number for wire transfer
Bank account registration	Bank account number
Additional information	

4 SIGNATURE(S)

I authorize *Wells Fargo Advantage Funds* and its transfer agent, to process this redemption by redeeming the appropriate number of shares from the account at the current Net Asset Value, including any applicable fees. If the *Wells Fargo Advantage Funds* account is a Uniform Gifts/Transfers to Minors Act (UGMA/UTMA) account, I certify that any funds redeemed will be used for the benefit of the minor.

You must sign and date here to complete this request. A Medallion Guarantee may also be required.

X _____
Signature of account owner or authorized individual

Print name

Date

Medallion Guarantee** (if applicable)

X _____
Signature of joint account owner or authorized individual

Print name

Date

Medallion Guarantee** (if applicable)

HAVE ALL SIGNATURES MEDALLION GUARANTEED TO:

- Send proceeds to an address that is different from the permanent address listed on the account or to a new address prior to the expiration of the 15-day hold;
- Make proceeds payable to someone other than or in addition to all *Wells Fargo Advantage Funds* account owner(s);
- Send proceeds to a bank where all *Wells Fargo Advantage Funds* account owner(s) are not listed in the bank account registration;
- Purchase proceeds into another *Wells Fargo Advantage Funds* account if all registered owner(s) are not listed in the account registration; or
- Request a redemption over \$100,000.

****A Medallion Guarantee** may be obtained from any eligible guarantor institution, as defined by the Securities and Exchange Commission. These institutions include banks, savings associations, credit unions, and brokerage firms that participate in the Medallion Program. The bar coded stamp with the words **"MEDALLION GUARANTEED"** must be stamped near **each** signature being guaranteed. The guarantee must appear with the name of the guarantor institution and the signature of an individual authorized on behalf of the guarantor institution. **Note that a Notary Public stamp or seal is not acceptable.**