



Custodial Quarterly Redemption Request Cancellation Form

Please use this form to cancel a previously submitted redemption of shares request. Forms must be received in good order up to three days prior to the end of the quarter.

Please note: For use with IRA, SEP, Keogh accounts.			
CURRENT SUBSCRIBER INFORMATION (Plea	ase print name in which shares are registered)		
Investor Name	Co-Investor	Name	
Investor Social Security/ Taxpayer ID #	Co-Investor	Social Security/ Taxpayer ID #	
Street Address	City	State ZIP	
Brokerage Account Number	Home Telephone	E-mail Address	
ORIGINAL REDEMPTION REQUEST			
☐ Full redemption.	☐ Partial redemption, number of shares:		
Signature of Investor or Trustee	on of my previously submitted redemption request Signature of Authorized Custodian	Date	
Signature of Co-Investor or Trustee, if applicable			
A Medallion Signature Guarantee is required fo Custodian. A notary public is not an acceptable			
Guarantor: Affix signature guarantee here.			

Please mail this completed form to:

Direct Overnight Mail:
Dividend Capital —Industrial Property Trust C/O DST Systems Inc.
430 W. 7th Street, Suite 219079
Kansas City, MO 64105

P.O. Box: Dividend Capital P.O. Box 219079 Kansas City, MO 64121-9079

Dividend Capital — Industrial Property Trust Contact Information:

Phone Web Site E-mail

866.DCG.REIT (324.7348) industrial property trust.com operations@dividendcapital.com