

INSTRUCTIONS

NOTICE TO INVESTORS

The following contains detailed instructions on how an Investor in one of Griffin Capital's funds completes and submits a Contact Information Change Form, permitting a change of address, email address, phone number, and/or other contact information on the Investor's account as stated in their Subscription Document.

INSTRUCTIONS FOR INVESTORS

For an Investor to update their account information, all applicable Investor information must be completed, dated, and executed below. Electronic signatures (**with an accompanying certificate of authenticity**), photocopy, facsimile, and wet signatures are acceptable forms of execution. Please note that all Investor information and signatures must be consistent with the Investor's original Subscription Document. Once completed, Investors must provide the Contact Information Change Form and any accompanying documents to Griffin Capital using one of the methods below. For custodial held accounts, Investors must provide the Contact Information Change Form and any accompanying documents to its custodian for review, approval and submittal to Griffin Capital.

DOCUMENT SUBMISSION

Once the form has been fully completed and executed by all parties, the form should be returned using one of the following methods:

- eFax to Griffin Capital Investor Relations at (310) 526-0159
- Email to Griffin Capital's Investor Relations Team at InvestorRelations@griffincapital.com
- Mail directly to Griffin Capital, Attention: Investor Relations, 266 Kansas Street, El Segundo, CA 90245
- To request a secure link to upload, please email InvestorRelations@griffincapital.com

CURRENT INVESTOR INFORMATION

Fund Name (Please list all that apply): _____

Name of Investor: _____

Type of Ownership: Individual Ownership Joint Tenants Tenants in Common
 Community Property Revocable Trust Irrevocable Trust
 Corporation Partnership Limited Liability Company
 Other (specify): _____

INVESTOR #1

Please provide the below information for Spouse, Equity Owner, etc. #1:

Salutation: Mr. Mrs. Ms. Prefer Not to Say Other (Please Specify): _____

Name: _____

Date of Birth: _____

Social Security No.: _____

State of Residence: _____

INVESTOR #2, IF APPLICABLE

Please provide the below information for Spouse, Equity Owner, etc. #2:

Salutation: Mr. Mrs. Ms. Prefer Not to Say Other (Please Specify): _____

Name: _____

Date of Birth: _____

Social Security No.: _____

State of Residence: _____

Please provide additional pages as necessary.

CHANGE OF CONTACT INFORMATION

To update an Investor's contact information, please complete the following information.

INVESTOR #1

Pertains to: Legal Address Mailing Address Both

Investor Name: _____

New Address: _____

City / State / Zip: _____

New Home Phone: _____

New Business Phone: _____

New Email: _____

If the above address is outside of the United States, please confirm citizenship status below.

U.S. Citizen Resident Alien Non-Resident Alien

INVESTOR #2, IF APPLICABLE

Pertains to: Legal Address Mailing Address Both

Investor Name: _____

New Address: _____

City / State / Zip: _____

New Home Phone: _____

New Business Phone: _____

New Email: _____

If the above address is outside of the United States, please confirm citizenship status below.

U.S. Citizen Resident Alien Non-Resident Alien

Note: Investors that are non-resident aliens must submit the appropriate W-8 form (W-8BEN, W-8ECI, W8EXP or W8IMY)

SIGNATURES & CERTIFICATION

By signing below, the Investor is authorizing the above referenced changes to their account. The below must match exactly as the name(s) appear(s) in the Subscription Document. All registered owners must sign. This authorization form is subject to the acceptance of the above referenced investment(s).

Investor #1 Signature & Date

Investor #2 Signature & Date

Investor #1 Print Name

Investor #2 Print Name

CUSTODIAN CERTIFICATION

REQUIRED FOR CUSTODIAL HELD INVESTORS ONLY

For custodial ownership accounts, the Investor's Contact Information Change Form must be fully completed, dated, executed, and sent to the custodian for review and certification.

To approve the foregoing information, please fully complete, sign and certify via medallion guarantee the following:

Name of Custodian or Trustee: _____
Name of Trust, If Applicable: _____
Mailing Address: _____
City, State, Zip: _____
Business Phone: _____
Custodian Tax ID# _____
Custodian Account #: _____
Grantor(s)/Testator(s): _____
Name of Custodian/Administrator: _____

Custodian Signature Date

Medallion Guarantee (Required):

PAPERWORK SUBMITTAL

Once the form has been fully completed and executed by all parties, the form should be returned using one of the following methods:

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- Mail directly to Griffin Capital, Attention: Investor Relations, 266 Kansas Street, El Segundo, CA 90245
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