

Jones Lang LaSalle Income Property Trust, Inc.

INTERESTED PARTY FORM

Please complete Section A and Section B. All stockholders must sign Section C in order for change(s) to be made.

A - STOCKHOLDER INFORMATION

Name of Stockholder(s) – Exactly as indicated on statement of account:

Current Registration Address:

Address

City State Zip

Phone Number Email Address

Account Number: _____

B – INTERESTED PARTY

Check box if you would like statements sent to both Stockholder and Interested Party addresses listed

Name

Address

City State Zip

Phone Number Email Address

C - SIGNATURE

ALL STOCKHOLDERS MUST SIGN

Signature – Stockholder

Date

Signature – Co-Stockholder

Date

Printed Name of Stockholder

Printed Name of Co-Stockholder

MAIL, FAX OR EMAIL COMPLETED FORM TO
Mail:
Jones Lang LaSalle Income Property Trust, Inc.
Attn: Stockholder Services
PO Box 219165
Kansas City MO 64121-9165

Fax:
+1 855 223 2473

Email:
JLLIPT@lasalle.com