

DISBURSEMENT CHANGE AUTHORIZATION

Use this form to change the delivery of your quarterly dividend payment. You can choose to have your dividends paid by check, electronic deposit to your bank, mailed to an alternate address. All account holders must sign. Please include a voided check if electronic deposit to your bank account is requested.

Please note, qualified accounts (IRA, SEP IRA, Roth IRA, Pension, etc...) must get custodial signature to change the distribution method, and cannot request payment be made to a location other than the custodian account. If the dividend for a qualified account is not paid to the custodian you could be liable for pre-mature distribution penalties from your IRA, or other qualified account. Please consult your financial advisor or tax professional for more information.

SEND TO:

GLADSTONE INVESTOR SERVICES c/o CONDUENT Securities Services 12720 Hillcrest Road Suite 115 Dallas, TX 75230 FAX (214) 887-7411 My shares are currently registered as follows: Gladstone Account Number: _ _ _ _ _ City, State, Zip:____ IRS Tax Identification Number: e-mail address : Telephone: ___ __- ___- ___ __- _______ Please change my disbursement method to the following (check box below): Send distributions via check to my home address (not available for qualified plans) Send distributions via check to Alternate Payee or Custodian (if this is a custodial account you would need the signature of the Custodian on 2^{nd} Page.) Name_____Address____ Account # City, State Zip Send duplicate copies of my Statements to alternate payee listed here Name Address

Account # City, State Zip

deposit my distributions to the	checking or savings acco	eustodial accounts) I authorize Gladstone or in count identified below. The authority will remain in	force until I
Gladstone or its agent in writing	ng to cancel it. In the eve	nt that Gladstone or its agent deposits funds error	neously into
account, Gladstone or its age	ent is authorized to debit m	y account for an amount not to exceed the amou	nt of the
erroneous deposit.			
Financial Institution Name			
Account #			
	Please attach a	voided check here	
	Please attach a		Date
ount Holder Signature			Date

If you have Questions? Call 877-588-5596

is not available on these types of accounts. Deposits must go to the custodian.)