

**Important** – When completed, please send to:  
AMERICAN FINANCE TRUST, INC.  
C/O DST SYSTEMS, INC.,  
430 W. 7TH STREET,  
KANSAS CITY, MO 64105-1407

For complete terms and conditions please refer to the American Finance Trust (“AFIN”) Distribution Reinvestment Plan. A copy of the Plan can be found on the website: [www.americanfinancetrust.com](http://www.americanfinancetrust.com) or provided by calling 866-902-0063.

<p><b>1</b> <b>Required for ALL Changes</b></p> <p><b>Important:</b> Please use BLOCK letters.</p> <p><b>Note:</b> Account number may be found on your account statement. If you have multiple account numbers, you must complete a separate form for each.</p>	<p><b>Registration Name(s) on Account</b></p> <p>Name of Account Owner _____</p> <p>Social Security Number (or) Tax Identification Number _____</p> <p>Account Number _____</p> <p>Name of Joint Account Owner (if applicable) _____</p> <p>Social Security Number (or) Tax Identification Number _____</p> <p>Name of Trust or Business Entity (Does not apply to IRA accounts) _____</p> <p>Name of Custodian or Trustee _____</p> <p>Custodian/Trust/Business Entity Tax ID# _____</p>
<p><b>Important:</b> If you do not check any box, <b>FULL DISTRIBUTION REINVESTMENT</b> will be assumed.</p>	<p>Please check the appropriate box below:</p> <p><input type="checkbox"/> <b>FULL DISTRIBUTION REINVESTMENT</b> - Reinvest all distributions for this account.</p> <p><b>OR</b></p> <p><input type="checkbox"/> <b>PARTIAL DISTRIBUTION REINVESTMENT</b> - If Partial, please select what percentage of each distribution you would like reinvested in AFIN Shares:    <input type="checkbox"/> 25%    <input type="checkbox"/> 50%    <input type="checkbox"/> 75%</p>

You may change your DISTRIBUTION REINVESTMENT preferences at your discretion. Please see the AFIN Distribution Reinvestment Plan for details.

**I (We) hereby appoint DST Systems, Inc. as my (our) Agent under the terms and conditions of the Plan, to receive cash payments and apply them to the purchase of shares of American Finance Trust, Inc. common stock as set forth herein.**

<p><b>2</b></p>	<p><b>Required Signatures</b></p> <p><b>Required Signatures – All Investors or Authorized Representative(s)</b></p> <p>Owner/Authorized Person's Signature _____ Date (mm/dd/yyyy) _____</p> <p>Co-Owner/Trustee/Custodian's Signature (if applicable) _____ Date (mm/dd/yyyy) _____</p> <p>Owner/Authorized Person's Signature _____ Date (mm/dd/yyyy) _____</p>
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