

## Monthly Redemption Request Cancellation Form



Effective May 2023

Please use this form to cancel a previously submitted redemption of shares request. Forms must be received in good order before 4:00 p.m. ET on the last business day of the applicable month.

☐ AREIT – T Share Class	☐ AREIT – S Share Class		☐ AREIT – D Share Class
☐ AREIT – I Share Class	☐ AREIT – E Share Class		☐ AREIT – Converted I Share Class
Registration			
Investor Social Security/Taxpayer ID #		Co-Investor Soci	al Security/Taxpayer ID #
Birth Date/Articles of Incorporation (MM/D	D/YY)	Co-Investor Birtl	n Date (MM/DD/YY)
Street Address	City	State	ZIP
Ares Account Number	Home Telephone	Email Address	
☐ Full redemption ☐ Partial redemption	on, number of shares: or \$:		
Subscriber Signatures	on, number of shares: or \$: ion of my previously submitted redemption requ		e Income Trust shares.
□ Full redemption □ Partial redemption  Subscriber Signatures  By signing below, I am requesting a cancellat			e Income Trust shares.
□ Full redemption □ Partial redemption  Subscriber Signatures  By signing below, I am requesting a cancellat  Signature of Investor or Trustee	ion of my previously submitted redemption requ	est of my Ares Real Estate	e Income Trust shares.
☐ Full redemption ☐ Partial redemption  Subscriber Signatures	ion of my previously submitted redemption requ	est of my Ares Real Estate  Date  Date  is	e Income Trust shares.

**Direct Overnight Mail:** 

Ares Wealth Management Solutions c/o SS&C GIDS, Inc. 430 W. 7th Street, Suite 219079 Kansas City, MO 64105 P.O. Box: Ares Wealth Management Solutions c/o SS&C GIDS, Inc. P.O. Box 219079 Kansas City, MO 64121-9079

Not a Deposit | Not FDIC Insured | Not Guaranteed by the Bank | May Lose Value | Not Insured by Any Federal Government Agency

**Ares Wealth Management Solutions Contact Information:** 

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